

ROUTING SLIP FOR INVOICES

DATE January 12, 2018

CONTRACTOR Caring to Love

CFMS 2000224936

MONTH OF SERVICE December-2017

TO LeBlanc

INITIAL REVIEW J

DATE 1/31/18

FSPS2 REVIEW

DATE

Program Manager 1/2 S

DATE 1/31/18

POSTED TO SPREADSHEET ✓

SENT TO FISCAL 2.1.18 EQUIPMENT TO BE TAGGED? no

ADVANCE RECOUPMENT?

COMMENTS:

-\$289.00 computer and -\$109.99 printer because equipment not in budget.



DEPARTMENT OF CHILDREN AND FAMILY SERVICES
Cost Reimbursement Invoice Form

Caring To Love Ministries

Contractor Name
3813 N Flannery Rd
Mailing Address
Baton Rouge, LA 70814
City, State, Zip
Dorothy Wallis / 225-273-1124
Contact Person/Telephone Number

Received	
JAN 12 2018	
DCFS Economic Stability	

December 2017

Service Period

719685

Contractor/PO#

2000 224936-1217

Invoice Number

EXPENDITURES

EXPENDITURE CATEGORY (A)	APPROVED BUDGET (B)	CURRENT PERIOD EXPENDITURES (C)	PRIOR PERIOD EXPENDITURES (D)	CUMMULATIVE EXPENDITURES (E)	REMAINING CONTRACT BALANCE (F)	COST SHARING (G)
PERSONNEL	\$ 72,960.00	\$ 4,336.92	\$ 23,543.94	\$ 27,880.86	\$ 45,079.14	
FRINGE BENEFITS	\$ 10,309.44	\$ 684.48	\$ 3,608.69	\$ 4,293.17	\$ 6,016.27	
TRAVEL	\$ 1,080.00	\$ 251.43	\$ 776.02	\$ 1,027.45	\$ 52.55	
OPERATING SERVICES	\$ 60,370.56	\$ 4,586.92	\$ 15,284.30	\$ 19,851.22	\$ 40,519.34	
MAT/SUPPLIES	\$ -	\$ -	\$ -	\$ -	\$ -	
PROFESSIONAL SERVICES	\$ 94,200.00	\$ 11,675.00	\$ 34,825.00	\$ 46,500.00	\$ 47,700.00	
OTHER CHARGES	\$ 434,880.00	\$ 36,955.00	\$ 172,865.00	\$ 209,820.00	\$ 225,060.00	
EQUIPMENT/ACQUISITIONS		\$ -	\$ -	\$ -	\$ -	
INDIRECT COST	\$ 57,000.00	\$ 4,750.00	\$ 23,750.00	\$ 28,500.00	\$ 28,500.00	
TOTALS	\$ 730,800.00	\$ 69,219.75	\$ 274,652.95	\$ 337,872.70	\$ 392,927.30	\$ -

\$62,820.77

Contractor Certification

I certify that the expenditures detailed above are correct, that payment for these services has not been previously issued, and that the services were rendered in accordance with the terms and conditions of the contract.

, President/CEO

Signature of Authorized Contractor Representative and Title

1/11/2018

Date

FOR DCFS USE ONLY					
DCFS Invoice Number	Org	Obj	Rep Cat	Sub Obj	ACTV
224936-1217	4274	3740	5071	Line 2	ACTV
	Org	Obj	Rep Cat	Sub Obj	ACTV
	Org	Obj	Rep Cat	Sub Obj	ACTV

Program
Compliance
Approval

I certify that the expenditures have been reviewed in accordance with contract and program guidelines and deliverables have been received.

Jeanine LeBlanc 1/31/18

Signature and Title of Authorized DCFS Official

Equipment disallowed

Jeanine LeBlanc 1/31/18

Jeanine M. LeBlanc

From: Jeanine M. LeBlanc
Sent: Thursday, February 01, 2018 1:04 PM
To: 'Dorothy Wallis'
Subject: 2000224936 CtL December 2017 invoice
Attachments: image2018-02-01-124050.pdf

Ms. Wallis:

Attached is a copy of your December 2017 invoice.

\$289.00 HP Compaq computer has been disallowed because this item is considered equipment. Your contract budget does not include equipment.

\$109.99 Epson printer has been disallowed because this item is considered equipment. Your contract budget does not include equipment.

Jeanine LeBlanc

Jeanine LeBlanc
ES Program Consultant
Dept. Children and Family Services
627 North Fourth Street, 5-321
Baton Rouge, LA 70802
Jeanine.LeBlanc@la.gov
Office 225-342-5417
Fax 225-342-2536

**LIFE CHOICE PROJECT
PROVIDER REQUEST FOR PAYMENT
COST REIMBURSEMENT INVOICE**

CONTRACTOR:	<u>Caring to Love Ministries</u>	REPORT CATEGORY #	<u>5071</u>
SERVICE PROVIDED:	<u>Abortion Alternative-Statewide,</u>	P. O. #	<u>2000 224936</u>
ADDRESS	<u>3813 N. Flannery Rd.</u>	GRS ORG CODE #	<u>4274</u>
	<u>Baton Rouge, LA 70814</u>	OBJECT CODE	<u>3740</u>
CONTACT PERSON:	<u>Dorothy Wallis</u>	INVOICE #	<u>2000224936-1217</u>
TITLE:	<u>President/CEO</u>	PHONE #	<u>225-273-1124</u>
		MONTH & YEAR	<u>December 2017</u>
		PARISH SERVED:	<u>Statewide</u>

CUMM PREVIOUS 1st MONTH PARTICIPANTS	<u>955</u>
1st MONTH PARTICIPANTS SERVED THIS MONTH:	<u>149</u>
CUMMULATIVE 1st MONTHPARTICIPANTS	<u>1104</u>

SECTION A - SALARY

Services Coordinator	<u>Sanaretha Gray</u>	<u>1,756.92</u>
Home Prenatal Care Nurse	<u>Kim Hardee</u>	<u>1,600.00</u>
Home Prenatal Care Educator	<u>J Monic Adams</u>	<u>980.00</u>
Clerical Support Specialist		<u>0.00</u>
	<u>TOTAL SALARIES-Direct Svcs</u>	<u>4,336.92</u>

4,336.92 ✓

SECTION B - FRINGE

Insurance	<u>Direct Services</u>	<u>250.00</u>
FICA	<u>Direct Services</u>	<u>331.77</u>
Worker's Compensation	<u>Direct Services</u>	<u>102.71</u>
	<u>TOTAL FRINGES-Direct Svcs</u>	<u>684.48</u>

684.48 ✓

SECTION C - TRAVEL

Travel	<u>Direct Services</u>	<u>234.09</u>
Travel	<u>Direct Services</u>	<u>17.34</u>
	<u>TOTAL TRAVEL-Direct Svcs</u>	<u>251.43</u>

251.43 ✓

SECTION D - OPERATING EXPENSES

Printing Ad America 12/1	<u>Direct Services</u>	<u>pd</u>	<u>337.95</u> ✓
Printing Ad America 12/1	<u>Direct Services</u>	<u>pd</u>	<u>1,100.00</u> ✓
Office Supplies	<u>Direct Services</u>	<u>pd</u>	<u>1,794.02</u> ↙ <u>1395.03</u>
Copy Machine Delagel 12/23	<u>Direct Services</u>	<u>pd</u>	<u>250.00</u> ✓
Internet Service CT2/Att 12/23	<u>Direct Services</u>	<u>pd</u>	<u>195.00</u> ✓
Media	<u>Direct Services</u>		<u>0.00</u>
Website Wufso 12/20	<u>Direct Services</u>	<u>pd</u>	<u>14.95</u> ✓
KNOWforSURE 12/31	<u>Direct Services</u>	<u>pd</u>	<u>875.00</u> ✓

TOTAL OPERATING EXPENSES FOR MONTH

4,566.92

4,167.93

LIFE CHOICE PROJECT**PROVIDER REQUEST FOR PAYMENT****COST REIMBURSEMENT INVOICE**CONTRACTOR: Caring to Love Ministries

J Ham - 12/31 - \$800.00 pd
 S Kray - 12/31 - \$250.00 pd
 M Ryers - 12/29 - \$250.00 pd
 E. Elligan - 12/31 - \$150.00 pd
 A. Farr - 12/30 - \$500.00 pd
\$1950.00

SECTION F - PROFESSIONAL

Accounting Services	Vickie Davis	December	2,200.00	✓ pd
Performance Improvement Coor	Garcia Bodley	12/31/17	1,125.00	✓ pd
Public Relations/Media Coord	Randy Rice	12/31/17	700.00	✓ pd
Webmaster/Info Tech Cons.	Kathleen Benfield	12/31/17	700.00	✓ pd
Information Technology Cons.	Turnkey	12/1/17	250.00	✓ pd
Auditor Services	Michael Choate, CPA	12/29/17	750.00	✓ pd
Professional Technical Svc	JHam/Rita Michelle/Emily/Alexis		1,950.00	
				11,675.00
				11,675.00

TOTAL PROFESSIONAL

11,675.00

SECTION G-OTHER CHARGES

<u>Client Services:</u>	<u>Cost</u>	<u># Clients</u>	<u>TOTALS</u>
Intake Application Process	\$ 10.00	149	1,490.00
Positive Pregnancy Test	\$ 10.00	170	1,700.00
Negative Pregnancy Test	\$ 10.00	34	340.00
Abstinence Education	\$ 30.00	34	1,020.00
Counseling	\$ 40.00	191	7,640.00
Referral Services	\$ 10.00	215	2,150.00
Health Risk Assessment	\$ 30.00	228	6,840.00
Care Plan Development	\$ 30.00	115	3,450.00
On-going Care	\$ 30.00	126	3,780.00
Family Support Services	\$ 40.00	80	3,200.00
Home Outreach Support Services	\$ 75.00	51	3,825.00
Birth Outcome Confirmation	\$ 40.00	38	1,520.00
			36,955.00

TOTAL OTHER CHARGES**SECTION I - INDIRECT COST**

Project Administrator	Dorothy Wallis	4,500.00
Health Insurance		250.00
		4,750.00

TOTAL INDIRECT COST

4,750.00

4,750.00

TOTAL INVOICE

\$ 63,219.75
62,820.77
 1/11/2018

Authorized Signature per Dorothy Wallis

Project Administrator

Date

OFS Approval

Telephone Number

1/11/2018

Date

*NOTE-If space is not sufficient, make reference to change on this form and include detailed attachment.

MAIL TO:

OM&F FISCAL
 PAYMENT MANAGEMENT/CONTRACTS
 PO BOX 3927
 BATON ROUGE, LOUISIANA

Page 3/3

Life Choice Project

*Coordinated Prenatal Care for
Louisiana's Pregnant Women*

December 11, 2017

Department of Social Services
Office of Family Support
627 North 4th Street
5th Floor Cubicle 5-321
Baton Rouge, Louisiana 70802

**RE: 2000224936 CTL Alternative to Abortion
December 2017-2018 Reimbursement Invoice**

Dear Ms. Leblanc,

Please find attached, our December 2017 Cost Reimbursement Invoice for 2017-2018 Alternative to Abortion Initiative along with the hard copy of the TANF Report for the month of December 2017.

This is to advise you that due to extenuating circumstances following the August 2016 flood event. Women's Life Ministries has been struggling in recapturing its client volume. Subsequently, the center is no longer a provider under the Louisiana Life Choice Project effective December 31, 2017.

Under Category Auditor, because of their cred card malfunction the auditor signed the invoice I put the confirmation number on the invoice.

Thank you for your consideration, kindness and all you have done to help those that are in need in the Louisiana area.

If you have any questions, please feel free to contact me at any time.

I remain,



Dorothy Wallis
Program Administration
Caring to Love Ministries



Delivery Confirmation

I, the undersigned, acknowledge receipt of the following:

- **Letter to Ms. Jeanine Le Blanc**
- **One Copy**
- **Cover Letter**
- **Cost Reimbursement Invoices for December 2017**
- **Section A: Salary**
- **Section B:Fringe**
 - **FICA**
 - **LCTA – Worker Compensation**
- **Section C: Travel**
- **Section D: Operating Expenses**
 - **Cancelled Checks and Wire Transfers**
- **Section F: Professional services**
 - **Invoices, Invoice Description Receipts, Cancelled Checks and ACH Wire Transfers**
- **Section G: Other Charges – Coordinated Prenatal Care Services**
 - **Subcontractors' Front Page and Wire Transfer**
- **Section I: Indirect Costs- Project Administrative**
 - **Project Administrator Invoice, Time Study and Bank Statements (ACH)**
- **TANF –MOS Report December 2017**

Please sign and return via scanned or email to dwallis@ctlm.org

Thank You,

P.O.# 200 224936 - 1217
ACH Transfer Detail Grid for December 2017

ection	Budget Category	Item description	Payee	Inv. Page	ACH Page	Proof of Electronic Bank Statement	Bank Str Page #
C	Operating Expense	Travel	Care Pregnancy Ctr	24-27,29-30	28,31	Gulf Coast Bank & Tst	5
D	Operating Expense	Printing	Randy Rice & Assoc	36	37	Gulf Coast Bank & Tst	5
D	Operating Expense	Office Supplies	Restoration Pregnancy	39-44	45	Gulf Coast Bank & Tst	5
D	Operating Expense	Office Supplies	Access/Catholic Charities	46	47	Gulf Coast Bank & Tst	5
D	Operating Expense	Office Supplies	A Pregnancy Center	48-49	50	Gulf Coast Bank & Tst	5
D	Operating Expense	Office Supplies	Women's Resource Ctr	51-54	55	Gulf Coast Bank & Tst	5
D	Operating Expense	Office Supplies	Women's Life Ministries	56	57	Gulf Coast Bank & Tst	5
D	Operating Expense	Office Supplies	Care Pregnancy Center	58-59	60	Gulf Coast Bank & Tst	5
D	Operating Expense	Office Supplies	CPC-Gonzales	61	62	Gulf Coast Bank & Tst	5
D	Operating Expense	Marketing & Advertisement	Randy Rice & Assoc.	n/a	n/a	Gulf Coast Bank & Tst	5
D	Operating Expense	Knowforsure	Sources for Women	69	70	Gulf Coast Bank & Tst	5
F	Professional	Accounting Services	Direct Mailing-Vickie Davis	72-73	74	Gulf Coast Bank & Tst	5
F	Professional	Performance Impr Coordinator	Resources for Comm.-Garcia Bodley	75	76	Gulf Coast Bank & Tst	5
F	Professional	Public Relations	Randy Rice & Assoc	77	78	Gulf Coast Bank & Tst	5
F	Professional	Webmaster	Kathleen Benefield	79	80	Gulf Coast Bank & Tst	5
F	Professional	Prof Tech Svc	Jennifer Ham	85	86	Gulf Coast Bank & Tst	5
F	Professional	Prof Tech Svd	Sanaretha Gray	87	88	Gulf Coast Bank & Tst	5
F	Professional	Prof Tech SvS	Michelle Dyess	89	90	Gulf Coast Bank & Tst	5
F	Professional	Prof Tech Svc	Emily Ilgenfritz	91	92	Gulf Coast Bank & Tst	5
F	Professional	Prof Tech Svc	Alexis Farrugia	93	94	Gulf Coast Bank & Tst	5
G	Coor Prenatal Care Serv	Sub-contractor	CarePregnancy Ctr	97	99	Gulf Coast Bank & Tst	5
G	Coor Prenatal Care Serv	Sub-contractor	Wom Res Ctr Natch	100	102	Gulf Coast Bank & Tst	5
G	Coor Prenatal Care Serv	Sub-contractor	A Prg. Ctr. & Clinic	103	105	Gulf Coast Bank & Tst	5
G	Coor Prenatal Care Serv	Sub-contractor	Access Met-Catholic	106	108	Gulf Coast Bank & Tst	5
G	Coor Prenatal Care Serv	Sub-contractor	Wom Life Minist	109	111	Gulf Coast Bank & Tst	5
G	Coor Prenatal Care Serv	Sub-contractor	Restoration Life	112	114	Gulf Coast Bank & Tst	5
G	Coor Prenatal Care Serv	Sub-contractor	CPC-Gonzales	115	117	Gulf Coast Bank & Tst	5
I	Indirect cost	Project Administrator	Dorothy Wallis	119	120	Gulf Coast Bank & Tst	5



Gulf Coast Bank and Trust Company LCP CHECKING 6649

\$1,666.26

Available Balance

Last Updated: 1/11/2018 10:58 AM

Start Date	End Date	Transaction Type
1/10/2018	<input type="button" value="31"/> to 1/11/2018	<input type="button" value="31"/>

Min Amount	Max Amount	Check #
\$0.00	to	\$0.00
		to

[Apply Filters](#)[Reset](#)

Date	Description	Act Page #	Amount
JAN 10 2018	Care Preg Ctr-Dec17	99	(\$14,965.00)
JAN 10 2018	A Preg Ctr-Dec17	105	(\$8,390.00)
JAN 10 2018	WRC Natch-Dec17	102	(\$4,930.00)
JAN 10 2018	D Wallis-Dec 2017	120	(\$4,500.00)
JAN 10 2018	Restoration-Dec17	114	(\$3,640.00)
JAN 10 2018	DMS-Dec 2017	74	(\$2,200.00)
JAN 10 2018	Catholic-Dec17	108	(\$2,140.00)
JAN 10 2018	WLM-Dec17	111	(\$1,970.00)
JAN 10 2018	ResourcesForComm-Dec17	76	(\$1,125.00)

5

		<u>Act Pg #</u>	
JAN 10 2018	Rice and Assoc-Printing	57	(\$1,100.00)
JAN 10 2018	CPC Gonzales-Dec17	117	(\$920.00)
JAN 10 2018	SFW-Dec 2017	70	(\$875.00)
JAN 10 2018	J Ham=Dec 2017	86	(\$800.00)
JAN 10 2018	K Benfield Dec 2017	80	(\$700.00)
JAN 10 2018	Rice & Assoc-P/R	78	(\$700.00)
JAN 10 2018	A Farrugia-Dec2017	94	(\$500.00)
JAN 10 2018	CPC-Ofc Supplies	60	(\$449.00)
JAN 10 2018	APCC-Ofc Supplies	50	(\$377.00)
JAN 10 2018	WRC-Ofc Supplies	55	(\$330.00)
JAN 10 2018	Restoration Ofc Supply	45	(\$278.60)
JAN 10 2018	M Dyess-Dec 2017	90	(\$250.00)
JAN 10 2018	S Gray-Dec 2017	88	(\$250.00)
JAN 10 2018	Travel-J Adams	28	(\$234.09)
JAN 10 2018	WLM-Ofc Supplies	57	(\$173.42)
JAN 10 2018	E Ilgenfritz-Dec 2017	92	(\$150.00)
JAN 10 2018	Catholic Charities-Ofc Supply	47	(\$116.00)

		<u>ACH Pg #</u>	
JAN 10 2018	CPC Gonzales-Ofc Supplies	62	(\$70.00)
JAN 10 2018	Travel-Dec Kim Hardee	31	(\$17.34)

7

PO# 2000 224936

SECTION A

SALARY

SECTION A - SALARY
Caring To Love Ministries
LCP Payroll Summary
December 2017

	<u>Adams, Jashonda M</u>	<u>Gray, Sanaretha N</u>	<u>Hardee, Kim A</u>	TOTAL
Employee Wages, Taxes and Adjustments				
Gross Pay				
Care Pregnancy Clinic Salary	1,756.92	1,900.00	2,874.68	6,531.60
Counseling Center Salary	0.00	0.00	0.00	0.00
Total Gross Pay	1,756.92	1,900.00	2,874.68	6,531.60
Deductions from Gross Pay				
Health Insurance (taxable)	0.00	0.00	-452.22	-452.22
Total Deductions from Gross Pay	0.00	0.00	-452.22	-452.22
Adjusted Gross Pay	1,756.92	1,900.00	2,422.46	6,079.38
Taxes Withheld				
Federal Withholding	0.00	-218.00	-313.00	-531.00
Medicare Employee	-25.47	-27.55	-41.68	-94.70
Social Security Employee	-108.93	-117.80	-178.23	-404.96
LA - Withholding	-36.97	-53.64	-65.56	-156.17
Medicare Employee Addl Tax	0.00	0.00	0.00	0.00
Total Taxes Withheld	-171.37	-416.99	-598.47	-1,186.83
Net Pay	1,585.55	1,483.01	1,823.99	4,892.55
Employer Taxes and Contributions				
Medicare Company	25.47	27.55	41.68	94.70
Social Security Company	108.93	117.80	178.23	404.96
Total Employer Taxes and Contributions	134.40	145.35	219.91	499.66

Position-Direct Services	Employee Name	Salary	Blue Cross	FICA	Worker's Comp	Total Fringe	Total
Services Coordinator	Sanaretha Gray	1,756.92		134.40	41.61	176.01	1,932.93
Home Prenatal Care Nurse	Kim Hardee	1,600.00	250.00	122.40	37.89	410.29	2,010.29
Home prenatal Care Educator	J Monic Adams	980.00		74.97	23.21	98.18	1,078.18
Clerical Support							
TOTALS		4,336.92	250.00	331.77	102.71	684.48	5,021.40

NOTE: The amount billed is the budgeted amount per our Budget Narrative. The Total Fringe is reflected.

Transactions Details

Posting Date	12/08/2017
Transaction Date	12/08/2017
Description	DDA CHECK 0000009412
Transaction Type	Debit
T/C	0077
Amount	\$741.51
Balance	\$4,374.31

CARING TO LOVE MINISTRIES
STAR ACCOUNT
3813 N. FLANNERY ROAD
BATON ROUGE, LOUISIANA 70814
(225) 273-1124

G WHITNEY BATON ROUGE,
LOUISIANA

9412

84-15854

12/5/17

PAY TO THE
ORDER OF Sanaretha A Gray

\$ 741.51

Seven Hundred Forty-One and 51/100

DOLLARS

Sanaretha A Gray
PO Box 413
Prairieville, LA 70769

VOID AFTER 60 DAYS
STAR ACCOUNT

MEMO

Pay Period: 11/16/17 - 11/30/17

AUTHORIZED SIGNATURE

10094120 00654001531

SECTION A-PERSONNEL SERVICES-Services Coordinator

LCP Budget to reimburse CTLM = \$1756.92 for month

10

Transactions Details

Posting Date	12/22/2017
Transaction Date	12/22/2017
Description	DDA CHECK 0000009422
Transaction Type	Debit
T/C	0077
Amount	\$741.50
Balance	\$11,175.11

CARING TO LOVE MINISTRIES STAR ACCOUNT 3813 N. FLANNERY ROAD BATON ROUGE, LOUISIANA 70814 (225) 273-1124		9422
PAY TO THE ORDER OF <u>Sanaretha A Gray</u>		84-15354
Seven Hundred Forty-One and 50/100		12/20/17
\$ 741.50		DOLLARS
Sanaretha A Gray PO Box 413 Prairieville, LA 70769		VOID AFTER 60 DAYS STAR ACCOUNT
MEMO	Pay Period: 12/01/17 - 12/15/17	AUTHORIZED SIGNATURE
THIS DOCUMENT CONTAINS HEAT SENSITIVE INK. TOUCH OR PRESS HERE TO REVEAL DATA.		
000942210 00654001531		

SECTION A-PERSONNEL SERVICES-Services Coordinator

LCP Budget to reimburse CTLM = \$1756.92 for month

Transactions Details

Posting Date	12/22/2017
Transaction Date	12/22/2017
Description	DDA CHECK 0000009413
Transaction Type	Debit
T/C	0077
Amount	\$976.46
Balance	\$11,916.61

CARING TO LOVE MINISTRIES
STAR ACCOUNT
3813 N. FLANNERY ROAD
BATON ROUGE, LOUISIANA 70814
(225) 273-1124

Hancock Whitney BATON ROUGE,
LOUISIANA

9413

84-15354

12/5/17

PAY TO THE ORDER OF Kim A Hardee

\$ 976.46

Nine Hundred Seventy-Six and 46/100

DOLLARS

Kim A Hardee
15847 Haynes Bluff Ave
Baton Rouge, LA 70817

VOID AFTER 90 DAYS
STAR ACCOUNT

AUTHORIZED SIGNATURE

MEMO

Pay Period: 11/10/17 - 11/30/17

#0094 630 0065400 6531

SECTION A-PERSONNEL SERVICES-Home Prenatal Care Nurse

LCP Budget to reimburse CTLM = \$1600.00 for month

12

Transactions Details

Posting Date	12/22/2017
Transaction Date	12/22/2017
Description	DDA CHECK 0000009423
Transaction Type	Debit
T/C	0077
Amount	\$847.53
Balance	\$10,327.58

Front	Back
-------	------

CARING TO LOVE MINISTRIES
STAR ACCOUNT
3913 N. FLANNERY ROAD
BATON ROUGE, LOUISIANA 70814
(225) 273-1124

WHITNEY BATON ROUGE,
LOUISIANA

9423

84-18584

12/20/17

PAY TO THE ORDER OF Kim A Hardes

\$ 847.53

DOLLARS

Eight Hundred Forty-Seven and 53/100

Kim A Hardes
15947 Haynes Bluff Ave
Baton Rouge, LA 70817

VOID AFTER 60 DAYS
STAR ACCOUNT

Masatty Waller
AUTHORIZED SIGNATURE

MEMO

Pay Period: 12/01/17 - 12/15/17

#0094231# 1065400153#

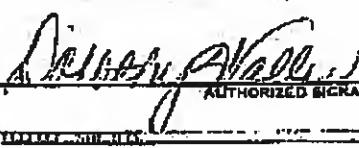
SECTION A-PERSONNEL SERVICES-Home Prenatal Care Nurse

LCP Budget to reimburse CTLM = \$1600.00 for month

13

Transactions Details

Posting Date	12/05/2017
Transaction Date	12/05/2017
Description	TELLER CASHED DEBIT 0000009409
Transaction Type	Debit
T/C	0040
Amount	\$847.33
Balance	\$11,003.40

CARING TO LOVE MINISTRIES		9409
STAR ACCOUNT		BATON ROUGE,
3813 N. FLANNERY ROAD		LOUISIANA
BATON ROUGE, LOUISIANA 70814		B4-16/634
(225) 273-1124		12/5/17
PAY TO THE ORDER OF Jashonda Monic Adams		\$ 847.33
Eight Hundred Forty-Seven and 33/100		DOLLARS
Jashonda Monic Adams 11625 Sherwood Valley Ct Baton Rouge, LA 70816		VOID AFTER 60 DAYS STAR ACCOUNT
MEMO Pay Period: 11/16/17 - 11/30/17		AUTHORIZED SIGNATURE  
SECTION A-PERSONNEL-SERVICES Home Prenatal Care Educator		

LCP Budget to reimburse CTLM = \$980.00 for month

14

Transactions Details

Posting Date	12/20/2017
Transaction Date	12/20/2017
Description	TELLER CASHED DEBIT 0000009420
Transaction Type	Debit
T/C	0040
Amount	\$738.22
Balance	\$8,580.18

Front Back

CARING TO LOVE MINISTRIES STAR ACCOUNT 3819 N. FLANNERY ROAD BATON ROUGE, LOUISIANA 70814 (225) 273-1124.		9420 WINGATE BATON ROUGE, LOUISIANA 84-154654 12/20/17 **738.22 DOLLARS
PAY TO THE <u>Jashonda Monic Adams</u> ORDER OF <u>Seven Hundred Thirty-Eight and 22/100</u>		VOID AFTER 60 DAYS STAR ACCOUNT <u>Jashonda Monic Adams</u> AUTHORIZED SIGNATURE
MEMO Pay Period: 12/01/17 - 12/15/17		SECTION A-PERSONNEL SERVICES Home Care Educator
LCP Budget to reimburse CTLM = \$980.00 for month		

PO# 2000 224936

SECTION B

FRINGES

GBS77117000183020



Louisiana



HMO Louisiana

SOUTHERN NATIONAL
LIFE INSURANCE COMPANY, INC.

Group Payment Notice

CARING TO LOVE MINISTRIES

ATTN: DOROTHY WALLIS
 3813 N. FLANNERY RD
 BATON ROUGE, LA 70814

Group ID:	27A611ERG
Subgroup ID:	0000

Due Date: 12/15/2017
 Billing Date: 11/29/2017

Invoice Period From: 12/15/2017
 Invoice Period Through: 01/14/2018
 Invoice Number: 173330001147

Subscriber Count: 2

Outstanding Balance.....	\$2,134.03
Premiums This Period.....	\$2,134.03
Member Adjustments.....	\$0.00
Fees and Other Adjustments.....	\$0.00
Current Billed Amount.....	\$2,134.03

*Pd in person
11/30/17
(RE)*

Please Pay Total Amount Due

5225 Employee Benefits-CDC

27A611ERG	2017	12	3
-----------	------	----	---

04BA0028 R02/16

Blue Cross and Blue Shield of Louisiana incorporated as Louisiana Health Service & Indemnity Company.
 HMO Louisiana, Inc. and Southern National Life Insurance Company, Inc. are subsidiaries of Blue Cross and Blue Shield of Louisiana.
 All three companies are independent licensees of the Blue Cross and Blue Shield Association.

continued ➔

SECTION B-FRINGES-Insurance

LCP Budget to reimburse CTLM = \$250.00 for month

Group Name: CARING TO LOVE MINISTRIES

Group ID: 27A61ERC

Subgroup ID: 0000

Due Date: 12/15/2017

► A001 - ACTIVE EMPLOYEES

Subscriber Name	Subscriber ID	Product	Adjustment	Premium	Amount*	Total Premium
Marden, Kim S.	202227628	PPO	\$0.00	\$1,244.65	0	\$1,244.65
Wallis, Dorothy T	200579064	PPO	\$0.00	\$889.38	0	\$889.38
Totals						\$2,134.03

SECTION B-FRINGES-Insurance

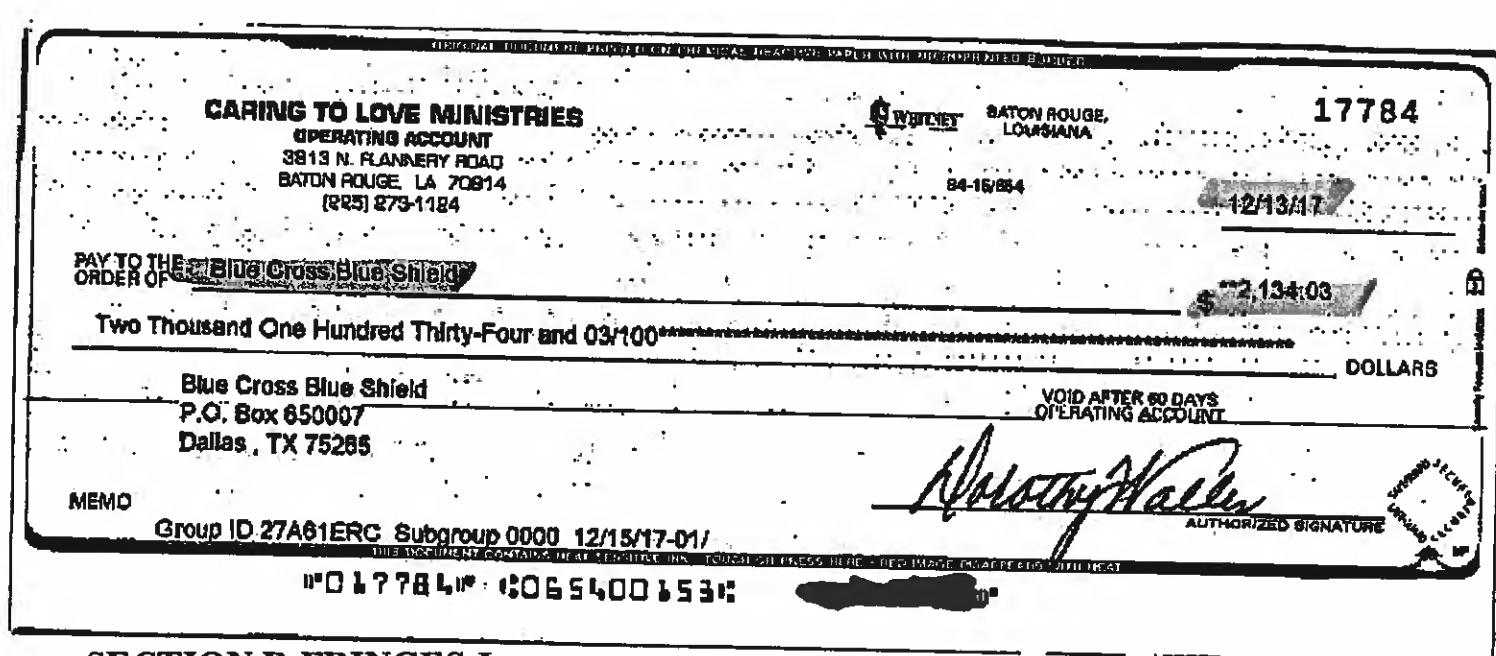
LCP Budget to reimburse CTLM = \$250.00 for month



Transactions Details

Posting Date	12/19/2017
Transaction Date	12/19/2017
Description	DDA CHECK 0000017784
Transaction Type	Debit
T/C	0075
Amount	\$2,134.03
Balance	\$12,416.09

Front	Back
-------	------



SECTION B-FRINGES-Insurance

LCP Budget to reimburse CTLM = \$250.00 for month



Electronic Federal Tax Payment System

[HOME](#)[ENROLLMENT](#)[MY PROFILE](#)[PAYMENTS](#)[HELP & INFORMATION](#)[CONTACT US](#)[LOGOUT](#)

TAXPAYER NAME: CARE PREGNANCY CLINIC

TIN: xxxx7636

Deposit Confirmation

Your payment has been accepted.

Payment Successful

An EFT Acknowledgement Number has been provided for this payment. Please keep this number for your records.

REMINDER: REMEMBER TO FILE ALL RETURNS WHEN DUE!

EFT ACKNOWLEDGEMENT NUMBER:

270841041722604

PLEASE NOTE

Any amounts represented in the subcategories of Social Security, Medicare, and Income Tax Withholding are for informational purposes only.

Payment Information	Entered Data
Taxpayer EIN	xxxx7636
Tax Form	941 Employers Federal Tax
Tax Type	Federal Tax Deposit
Tax Period	04/2017
Payment Amount	\$3,058.02
Settlement Date	01/10/2018
Subcategories:	
1 Social Security	\$1,794.38
2 Medicare	\$419.64
3 Tax Withholding	\$844.00
Account Number	xxxx6585
Account Type	CHECKING
Routing Number	065400153
Bank Name	WHITNEY BANK

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[USA.gov](#) [IRS.gov](#) [Treasury.gov](#)

Electronic Federal Tax Payment System® and EFTPS® are registered servicemarks of the U.S. Department of the Treasury's Financial Management Service.

PO# 2000 224936-1217

Section A-Fringes-Fica

Page 1 of 1

LCP Budget to reimburse CTLM = \$331.77 for month

20

PO# 2000 224936-1217



Workman's Comp Life Choice \$102.71 Section B

WORKER'S COMPENSATION INSURANCE COMPANY CTLM \$156.29

SEI E-REPORTING WORKSHEET

Total= \$259.00

Page Year of 2 117
Print Date: 12/26/2017

**Care Pregnancy Clinic
Caring to Love Ministries Inc
3813 N Flannery
Baton Rouge, LA 70814**

Agent: 578
Ozark South Central Insurance
(225)775-7614
Carrier Policy #: WC-1-019438
Rating State: LA
Payment Due: 1/15/2018

Policy period: 1/01/2017 - 1/01/2018
Reporting Period: 12/01/2017 - 12/31/2017

Policy No.: 001000019438117 Division: 0

Division: 0

(1) Code	(2) Classification	(3) Payroll	(4) Rate	(5) Premium
8810	Clerical Office Employees Noc	<u>7417.31</u>	.29	<u>21.51</u>
8864	Social Svcs Org-All Employees	<u>9003.60</u>	2.58	<u>232.29</u>
	Life Choice = \$102.71 CTLM = \$156.29 TOTAL = \$259.00			
	**** If no payrolls, report "none" ****			
Discounts included in lines (9) (13):		(6) Total Manual Premium		<u>253.80</u>
		(7) Increased Limits	.000%	+
		(8) Subtotal		<u>- 253.80</u>
		(9) Discount factor before modifier	x 1.000	
		(10) Subtotal		<u>- 253.80</u>
		(11) Experience Modifier	x	
Months not reported:		(12) Subtotal		<u>- 253.80</u>
		(13) Discount factor after modifier	x 1.000	
		(14) Total Premium Due		<u>- 253.80</u>
Make check payable to:		(15) Add Cents to round		<u>.7.20</u>
LCTA Casualty Insurance Company PO Box 86510 Baton Rouge, LA 70879-6510		(16)	+ 254.00	
		(17) Previous Balance	+ .00	
		(18) Total Due	- 254.00	

For billing inquiries, call: PREMIUM ACCT 225-242-4443

**For Billing
Instructions:**

INSTRUCTIONS:
Enter the payroll for each class code into column (3). Multiply by the rate in column (4), and then by .01, round to the nearest dollar, and place the result in column (5). Enter the premium in column (5), and enter the result in box (6). Multiply box (6) by the Increased liability percentage, round to the nearest dollar, and place the result in box (7). Add box (7) to box (8), and place the result in Subtotal box (8). Multiply box (8) by the Discount factor before modifier (9), round to the nearest dollar, and place the result in Subtotal box (10). Multiply box (10) by Experience modifier (11), round to the nearest dollar, and place in Subtotal box (12). Multiply box (12) by the Discount factor after modifier (13), round to the nearest dollar, and place the result in Total Premium Due (14). For box (15), the total reported payrolls (minus per capita payrolls) must be divided by 100 and then multiplied by the Foreign Terrorism rate and rounded to the nearest dollar. Multiply the State Tax % by box (14) and box (15) and place the result in box (16). Add the Previous Balance from box (17) to box (14) thru box (16). Place the result in box (18). Please attach a check for this amount to the completed form and return.

I (WE) THE UNDERSIGNED, HEREBY CERTIFY THAT THE FIGURES APPEARING ON THIS REPORT AS "ACTUAL PAYROLL" ARE A TRUE AND COMPLETE STATEMENT OF THE EARNINGS OF ALL EMPLOYEES COVERED UNDER THIS POLICY FOR THE PERIOD AS STATED.

Signature: Vicki Dyer

Title Accountant

Date: 1918

21

Copy of payment receipt from LCTA CASUALTY INSURANCE COMPANY

BusinessServices@intuit.com

Tue 1/9/2018 1:24 PM

To:luv luv <luv@ctlm.org>;

Dear Care Pregnancy Clinic - 19438

Below is the sales receipt provided to you by LCTA CASUALTY INSURANCE COMPANY

Transaction Receipt			
Transaction Type	Sale	Amount:	\$259.00
Name:	Care Pregnancy Clinic - 19438	Date & Time:	01/09/2018 - 11:24 PST
Check Information			
Account No.:	*****69	Account type:	Checking
Routing No.:	*****153		
Payment ID			
Authorization Code:	712-743	Transaction ID:	a0hhqm7

Thank you for your order,
LCTA CASUALTY INSURANCE COMPANY

LCTAACOUNTING@LCTACOMP.COM

This notice is to confirm your authorization for LCTA CASUALTY INSURANCE COMPANY to initiate either an electronic debit to your bank account or to create and process a demand draft against your bank account in the amount of \$259.00 on or after 01/09/2018 - 11:24 PST . If you have any questions about this payment or your authorization, you may contact LCTA CASUALTY INSURANCE COMPANY at LCTAACOUNTING@LCTACOMP.COM.

Please do not reply to this message as we are unable to respond to questions at this e-mail address.

PO# 2000 224936-1217

Section B-Fringes-Worker's Comp

Page 2 of 2

SECTION 1-FRINGES-Worker's Comp

LCP Budget to reimburse CTLM = \$102.71 for month

22

PO# 2000 224936

SECTION C

TRAVEL

PO# 2000 224936-1217

Section C-Travel

Page 1 of 5

Page 1 of 2

TRAVEL EXPENSE ACCOUNT

BA-12 (3/97)

The statement on the reverse side must be completely filled in by the payee prior to signature. Receipts must be attached as required by travel regulations.

NAME OF OFFICE OR EMPLOYEE

Jenanda Adams

ADDRESS

11625 Sherwood Valley CT

CITY

Baton Rouge

ACH = \$234.09

DATE OF CLAIM	10-31-17
DEPARTMENT	
DIVISION	Travel
SECTION	Travel
FOR PERIOD	12/1/17-12/31/17

Expense Summary

Automobile:	Lump-Sum Allowance	\$	\$ 234.09
	Per Mile Cost:	mi. @ .51	
Subsistence:	Lodging	\$	\$
	Meals (SEE PPM 49 FOR RECEIPTS REQUIRED FOR SPECIAL AND HIGH COST AREA MEALS)	\$	
Tolls and Parking		\$	
Tips (for baggage handling only)		\$	
Other Expenses		\$	
Less: Travel Advance		\$	
Total Reimbursable Costs	Travel reflects the vehicle usage for our Baton Rouge location to provide home outreach support services to our clients		\$ 234.09

Certificate of Payee

I certify that this expense account is just and true in all respects; that the distances shown were actually and necessarily traveled on the dates specified on official business only; that the expenses charged were incurred on official business of the State and none of the expenses have been paid by the State; and that the full amount is justly due.

SIGNED BY PAYEE

Home Prenatal Care Educator
TITLE OR POSITIONEast Baton Rouge
OFFICIAL DOMICILE

Certificate of Head of Budget Unit

I certify that the charges set forth on this expense account have been examined by me; that the services for which the charges are made were necessary and proper; and that, in my opinion, the amounts claimed are just and reasonable.

Dorothy Wallis

SIGNED BY:

CEO/President

TITLE

REMARKS BY HEAD OF BUDGET UNIT IN EXPLANATION OF UNUSUAL ITEMS, ETC.

Agency No.	Orgn.	Object	Sub Obj.	Rptg. Category	Amount	Document Reference

ACH = \$234.09

Date	Hour (AM/PM)		Territory Traveled			Odometer			Substance		
	Dep	Arr				Depart	Arrive	Miles	Meals	Tolls and Parking	Other Expenses
	No.	Cost									Cost
12/6/2017	9:46:00 AM	9:54:00 AM	3813 N. Flannery Rd, BR, LA 70814 to			115631	115639	8			
			9470 Greenwell Springs Rd, BR, LA 70814								
			9470 Greenwell Springs Rd, BR, LA 70814 to			115639	115647	8			
12/6/2017	10:12:00 AM	10:30:00 AM	3813 N. Flannery Rd, BR, LA 70814								
12/6/2017	2:45:00 PM	3:05:00 PM	3813 N. Flannery Rd, BR, LA 70814 to			115804	115812	8			
			6585 San Juan Dr, BR, LA 70811								
			6585 San Juan Dr, BR, LA 70811 to			115812	115820	8			
12/7/2017	1:45:00 PM	1:57:00 PM	3813 N. Flannery Rd, BR, LA 70814 to			115838	115846	8			
			6777 Oak Park Dr, BR, LA 70812								
			6777 Oak Park Dr, BR, LA 70812			115846	115854	8			
12/7/2017	2:36:00 PM	2:58:00 PM	3813 N. Flannery Rd, BR, LA 70814 to								
			13146 Florida Blvd, BR, LA 70815			115917	115919	2			
			13146 Florida Blvd, BR, LA 70815 to								
12/11/2017	9:57:00 AM	10:03:00 AM	3813 N. Flannery Rd, BR, LA 70814 to			115917	115919	2			
			13146 Florida Blvd, BR, LA 70815								
12/11/2017	10:51:00 AM	10:59:00 AM	3813 N. Flannery Rd, BR, LA 70814			115919	115921	2			
12/11/2017	2:27:00 PM	2:50:00 PM	3813 N. Flannery Rd, BR, LA 70814 to			115921	115932	11			
			7537 Green Gate Dr, BR, LA 70811								
			7537 Green Gate Dr, BR, LA 70811 to			115932	115943	11			
			3813 N. Flannery Rd, BR, LA 70814 D56								
12/13/2017	2:07:00 PM	2:35:00 PM	3813 N. Flannery Rd, BR, LA 70814 to			115985	116000	15			
			3462 Van Buren St, Baker, LA 70714								
			3462 Van Buren St, Baker, LA 70714 to			116000	116015	15			
			3813 N. Flannery Rd, BR, LA 70814								
12/14/2017	9:45:00 AM	10:10:00 AM	3813 N. Flannery Rd, BR, LA 70814 to								
			30060 Willie Turner Dr, Walker, LA 70785			116029	116047	18			
			30060 Willie Turner Dr, Walker, LA 70785 to								
			3813 N. Flannery Rd, BR, LA 70814			116047	116065	18			

Total Miles Traveled
Rate per Mile
Total Amount to Bill

140 ✓
0.51
\$ 71.40

ACH = \$234.09

Date	Hour (AM/PM)	Air	Territory Traveled	Odometer		Meals	Tolls and Parking	Tips	Description	Cost	Other Expenses
				Depart	Arrive						
12/14/2017	11:05:00 AM	11:35:00 AM	3813 N. Flannery Rd, BR, LA 70814 to 10012 Ponder Ln, BR, LA 70706	116065	116077	12					
12/14/2017	11:51:00 AM	12:12:00 PM	10012 Ponder Ln, BR, LA 70706 to 3813 N. Flannery Rd, BR, LA 70814	116077	116089	12					
12/14/2017	2:12:00 PM	2:25:00 PM	3813 N. Flannery Rd, BR, LA 70814 to 1809 Sherwood Forest Blvd, BR, LA 70816	116089	116094	5					
12/14/2017	2:42:00 PM	3:10:00 PM	1809 Sherwood Forest Blvd, BR, LA 70816 to 3813 N. Flannery Rd, BR, LA 70814	116094	116099	5					
12/15/2017	11:20:00 AM	11:45:00 AM	3813 N. Flannery Rd, BR, LA 70814 to 1555 Jefferson Hwy, BR, LA 70817	116103	116114	11					
			1555 Jefferson Hwy, BR, LA 70817 to 6515 Hanks St, BR, LA 70812	116114	116125	11					
12/15/2017	12:29:00 PM	1:00:00 PM	6515 Hanks St, BR, LA 70812 to 1076 N Donmoor Ave, BR, LA 70806	116125	116129	4					
12/15/2017	1:30:00 PM	1:39:00 PM	1076 N Donmoor Ave, BR, LA 70806 to 2:01:00 PM	116129	116132	3					
			1076 N Donmoor Ave, BR, LA 70806 to 8899 Florida Blvd, BR, LA 70815	116132	116143	11					
12/15/2017	1:55:00 PM	3:20:00PM	8899 Florida Blvd, BR, LA 70815 to 8565 Leake Ave, BR, LA 70810	116143	116159	16					
			8565 Leake Ave, BR, LA 70810 to 3813 N. Flannery Rd, BR, LA 70814	116159	116254	14					
12/15/2017	4:38:00 PM	5:17:00 PM	3813 N. Flannery Rd, BR, LA 70814 to 3813 N. Flannery Rd, BR, LA 70814 to	116254	116258	14					
12/20/2017	10:44:00 AM	11:16:00 AM	363 Mills Ave apt #22, BR, LA 70807 to 363 Mills Ave apt #22, BR, LA 70807	116258	116284	16					
12/20/2017	11:40:00 AM	12:10:00 PM	6535 Magnolia Beach Rd, DS, LA 70814	116284	116291	7					
12/20/2017	12:33:00 PM	12:46:00 PM	6535 Magnolia Beach Rd, DS, LA 70814 to 3813 N. Flannery Rd, BR, LA 70814	116284	116291	0					

Total Miles Traveled
Rate per Mile
Total Amount to Bill

127
0.51
\$ 64.77

1

D6

ACH = \$234.09

Date	Hour (AM/PM)	Territory Travelled	Odometer		Subsistence		Other Expenses Description	Cost
			Dep	Arrive	Miles	Lodging	Meals	
					No.	Cost	Tolls and	Parking
12/21/2017	10:33:00 AM	10:52:00 AM 3813 N Flannery Rd, BR, LA 70814 to 3485 Cedarcrest Ave, BR, LA 70816	116316	116325	9			
12/21/2017	11:18:00 AM	11:38:00 AM 3485 Cedarcrest Ave, BR, LA 70816 to 3813 N Flannery Rd, BR, LA 70814	116325	116334	9			
12/22/2017	12:57:00 PM	1:05:00 AM 3813 N Flannery Rd, BR, LA 70814 to 9532 Gleannside Ave, BR, LA 70814	116370	116374	4			
12/22/2017	1:26:00 PM	2:26:00 PM 9532 Gleannside Ave, BR, LA 70814 to 7446 Solitude RD, St Francisville, WF 70775	116374	116415	41			
12/22/2017	2:42:00 PM	4:20:00 PM 7446 Solitude RD, St Francisville, WF 70775 to 3813 N Flannery Rd, BR, LA 70814 to	116415	116456	41			
					0			
12/27/2017	10:55:00 AM	11:28:00 AM 3813 N Flannery Rd, BR, LA 70814 to 8166 Plank Rd, BR, LA 70811	116700	116710	10			
		8166 Plank Rd, BR, LA 70811 to						
12/27/2017	12:17:00 PM	12:52:00 PM 122 N. Lobdell Ave, BR, LA 70806 to 122 N. Lobdell Ave, BR, LA 70806	116710	116718	8			
		122 N. Lobdell Ave, BR, LA 70806 to						
12/27/2017	1:11:00 PM	1:48:00 PM 20011 Eastwood Dr, Zachary, LA 70791 to 20011 Eastwood Dr, Zachary, LA 70791 to	116718	116740	22			
12/27/2017	2:10:00 PM	2:57:00 PM 3813 N Flannery Rd, BR, LA 70814 to	116740	116762	22			
		3813 N Flannery Rd, BR, LA 70814 to						
12/28/2017	9:17:00 AM	9:39:00 AM 3813 N Flannery Rd, BR, LA 70814 to 10501 Burbank Dr., BR, LA 70810	116771	116784	13			
12/28/2017	9:53:00 AM	10:33:00 AM 10501 Burbank Dr., BR, LA 70810 to 3813 N Flannery Rd, BR, LA 70814	116784	116797	13			
		3813 N Flannery Rd, BR, LA 70814 to						

Total Miles Traveled
Rate per Mile
Total Amount to Bill

192 /
0.51
\$ 97.92

\$ 234.09

ACH = \$234.09



Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59096	LCP CHECKING xxxxx6649	\$234.09

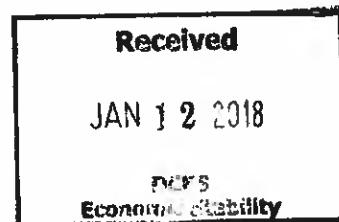
Tracking ID: 59096**Total Amount:** \$234.09**Created:** 01/09/2018 9:46 AM**Total Payments:** 1**Created By:** DOROTHY WALLIS**From:** LCP CHECKING xxxxx6649**Authorized:** 01/09/2018 9:47 AM**ACH Class Code:** CCD**Authorized By:** DOROTHY WALLIS**ACH Header:** CARING TO LOVE M**Will process On:** 1/9/2018**Effective:** 1/10/2018**RECIPIENTS:**

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
CARE PREGNANCY CLINIC	CARE PREGNANCY CLINIC		\$234.09	XXXX6569	Checking	XXXXXX0153	

Addenda: Travel- J Adams

APPROVAL(S):

1 DOROTHY WALLIS



28

TRAVEL EXPENSE ACCOUNT

BA-12 (3/97)

ACH = \$17.34

The statement on the reverse side must be completely filled in by the payee prior to signature. Receipts must be attached as required by travel regulations.

NAME OF OFFICER OR EMPLOYEE

Kim A. Handed

ADDRESS 15947 Haynes Bluff Ave.

Baton Rouge, La. 70817

DATE RECEIVED BY STATE

DEPARTMENT

DIVISION Travel

12/01/2017-12/31/17

Expense Summary

Automobile:	Lump-Sum Allowance	\$	
	Per Mile Cost: 34	mi. @ .51	\$ 17.34
Subsistence:	Lodging	\$	
	Meals (SEE PPM 49 FOR RECEIPTS REQUIRED FOR SPECIAL AND HIGH COST AREA MEALS)	\$	\$
Tolls and Parking			\$
Tips (for baggage handling only)			\$
Other Expenses			\$
Less: Travel Advance			\$
Total Reimbursable Costs	Travel reflects the vehicle usage for our Baton Rouge location to provide home outreach support services to our clients		\$ 17.34

Certificate of Payee

I certify that this expense account is just and true in all respects; that the distances shown were actually and necessarily traveled on the dates specified on official business only; that the expenses charged were incurred on official business of the State and none of the expenses have been paid by the State; and that the full amount is justly due.

SIGNED BY PAYEE

Kim Handed RN

TITLE OR POSITION

Home Prenatal Care Nurse

OFFICIAL DOMICILE

E. Baton Rouge

Certificate of Head of Budget Unit

I certify that the charges set forth on this expense account have been examined by me; that the services for which the charges are made were necessary and proper; and that, in my opinion, the amounts claimed are just and reasonable.

Dorothy Wallis

Dorothy Wallis

CEO/President

SIGNED BY:

TITLE

REMARKS BY HEAD OF BUDGET UNIT IN EXPLANATION OF UNUSUAL ITEMS, ETC.

Agency No.	Orgn.	Object	Sub Obj.	Rtg. Category	Amount	Document Reference



ACH = \$17.34

Created ▾ Status ▾ Approvals ▾ Transaction Type ▾ Account ▾ Amount ▾

1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59099	LCP CHECKING xxxxx6649	\$17.34
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Tracking ID: 59099

Created: 01/09/2018 9:48 AM

Created By: DOROTHY WALLIS

Authorized: 01/09/2018 9:48 AM

Authorized By: DOROTHY WALLIS

Will process On: 1/9/2018

Effective: 1/10/2018

RECIPIENTS:

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
CARE PREGNANCY CLINIC	CARE PREGNANCY CLINIC		\$17.34	XXXX6569	Checking	XXXXX0153	

Addenda: Travel-Dec Kim Hardee

APPROVAL(S):

1 DOROTHY WALLIS

operating 0.C
0.C

PO# 2000 224936

337.95 +
1,100.00 +
1,437.95 *

printing 1,437.95 +
ofc sup 1,395.03 +
copy 250.00 +
internet 195.00 +
website 14.95 +
knowforsure 875.00 +
4,167.93 *

0.C

SECTION D

OPERATING EXPENSES

printing: AT America 12/1/17 \$163.95 pd
AT America 12/1/17 - \$174.00 pd
337.95
Rand & Rice 12/31/17 \$1,100.00 pd
\$1,437.95

Ad America

Internet Marketing • Direct Mail • Yellow Pages

18308 Wickham Rd. Ste B
Olney, MD 20832

Phone: 301 570-7575
Fax: 866 324-5531

Date	Invoice #
12/1/2017	226036

Bill To
Caring to Love Ministries Life Choice Project Dorothy Wallis 3813 North Flannery Road Baton Rouge, LA 70814

Terms	Account #
Net 30	

Quantity	Description	Rate	Amount
1	Monthly maintenance fee for Life Choice.org	163.95	163.95

PO# 2000 224936-1217

Page 1 of 3

SECTION D-Operating Expense-Printing

LCP Budget to reimburse CTLM = ~~163.95+174.00=337.95~~ for Ad America

	Total	\$163.95
--	-------	----------

Ad America

Internet Marketing • Direct Mail • Yellow Pages

18308 Wickham Rd. Ste B
Olney, MD 20832

Phone: 301 570-7575
Fax: 866 324-5531

Date	Invoice #
12/1/2017	226035

Bill To
Caring to Love Ministries Life Choice Project Dorothy Wallis 3813 North Flannery Road Baton Rouge, LA 70814

Terms	Account #
Net 30	

Quantity	Description	Rate	Amount
1	Monthly maintenance fee for Achoice.org	174.00	174.00

PO# 2000 224936-1217

SECTION D-Operating Expense-Printing

LCP Budget to reimburse CTLM = 163.95+174.00=337.95 for Ad America

Page 2 of 3

	Total	\$174.00
--	-------	----------

Transactions Details

Posting Date	12/11/2017
Transaction Date	12/11/2017
Description	DDA CHECK 0000017778
Transaction Type	Debit
T/C	0077
Amount	\$337.95
Balance	\$858.74

CARING TO LOVE MINISTRIES
 OPERATING ACCOUNT
 3813 N. FLANNERY ROAD
 BATON ROUGE, LA 70814
 (225) 273-1124

WHITNEY BATON ROUGE,
 LOUISIANA

17778

84-16584

12/1/17

PAY TO THE ORDER OF Ad America

Three Hundred Thirty-Seven and 95/100

DOLLARS

Ad America
 18308 Wickham Rd, Ste B
 Olney, MD 20832

VOID AFTER 90 DAYS
 OPERATING ACCOUNT

PO# 2000 224936-1217
 MEMO

Messter Waller
 AUTHORIZED SIGNATURE

SECTION D - Operating Expenses (Do not use commas or dollar signs)
 10377811001530

LCP Budget to reimburse CTLM = 163.95+174.00=337.95 for Ad America

35

PO# 2000 224396-1217

Section D-Operating Expense-Printing

Page 1 of 2

Randy Rice and Associates ESP Budget to reimburse \$1100 Randy Rice & Assoc. **Invoice**

8221 Summa Ave Suite C
Baton Rouge, LA 70809-3451

DATE	INVOICE #
6/23/2017	13952

Caring to Love Ministries
3813 North Flannery
Baton Rouge, La 70814

Thank you for your business.

Total

\$1,100.00

36

LCP Budget to reimburse \$1100 Randy Rice & Assoc.

Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59131	LCP CHECKING xxxxx6649	\$1,100.00

Tracking ID: 59131**Total Amount:** \$1,100.00**Created:** 01/09/2018 10:12 AM**Total Payments:** 1**Created By:** DOROTHY WALLIS**From:** LCP CHECKING xxxxx6649**Authorized:** 01/09/2018 10:13 AM**ACH Class Code:** CCD**Authorized By:** DOROTHY WALLIS**ACH Header:** CARING TO LOVE M**Will process On:** 1/9/2018**Effective:** 1/10/2018**RECIPIENTS:**

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
RANDY RICE AND ASSOC	RANDY RICE AND ASSOC		\$1,100.00	XXXXX7939	Checking	XXXXX0137	

Addenda: Rice and Assoc-Printing

APPROVAL(S):

1 DOROTHY WALLIS

Jeanine M. LeBlanc

From: Dorothy Wallis <dwallis@ctlm.org>
Sent: Wednesday, January 31, 2018 12:10 AM
To: Jeanine M. LeBlanc
Subject: 2nd Reply 2000224936 CtL December 2017 invoice

Jeanine,

In regards to the ATA funding for grant period 17-18, in Section D of the Operating Expenses Office Supplies budget category

Caring To Love Ministries approved budget was \$3600 for 12 months. There are two disbursements of \$1800 that was allocated between, our six subcontractors based on their average performance of services.

When an agency is not fully reimbursed that is because the subcontractor exceeded their allocation for the period.

We trust this is the explanation needed. If I may be further assistance, please contact me. Please confirm receipt of this email.

Again Thanks,
Dorothy Wallis

Sent from my iPhone

On Jan 29, 2018, at 8:24 AM, Jeanine M. LeBlanc <Jeanine.LeBlanc.DCFS@LA.GOV> wrote:

Ms. Wallis:

These calculations do not show how you arrived at \$377.00 reimbursement for \$626.38 (\$337.38 & \$289.00) for supplies for A Pregnancy Center and Clinic. Please provide this information.

From: Jeanine M. LeBlanc
Sent: Monday, January 29, 2018 9:36 AM
To: 'Dorothy Wallis'
Subject: RE: 2000224936 CtL December 2017 invoice

Thank you.

I will let you know if we need anything else.

Jeanine LeBlanc

Jeanine LeBlanc

ES Program Consultant

Dept. Children and Family Services

627 North Fourth Street, 5-321

Baton Rouge, LA 70802

Jeanine.LeBlanc@la.gov

Office 225-342-5417

Fax 225-342-2536

From: Dorothy Wallis [mailto:dwallis@ctim.org]
Sent: Friday, January 26, 2018 10:59 PM
To: Jeanine M. LeBlanc
Cc: Dorothy Wallis
Subject: 2000224936 CtL December 2017 Invoice

Afternoon Jeanine,

As busy as you are, we're trusting you're doing well. When you open the first two files you will see the credit card receipt for the payment of the balance due for our yearly audit. Micheal Choate assistant had trouble printing the receipt by the time we delivered our billing.

In regards to the calculations establishing how the percentages are determined. In the Section D, Operating Expenses Office Supplies Summary form submitted in our December billing highlighted in yellow is the percentages reflecting how much was allotted to each sub-contractor.

The office supply allocation is based on each sub-contractors service performance. The comparison table indicates the average of total services, Home Outreach and Intakes. The Care Pregnancy Clinic allotted Women's Life some of their office supply portion because Women's Life was struggling to recapture their client volume following the August 2016 flood.

Should you have any questions or if I may be of further assistance please contact me anytime. Please confirm receipt of this email.

<image001.png>

"Teamwork can help you accomplish greatness."

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From: Jeanine M. LeBlanc [<mailto:Jeanine.LeBlanc.DCFS@LA.GOV>]
Sent: Thursday, January 25, 2018 10:24 AM
To: Dorothy Wallis <dwallis@ctlm.org>
Subject: 2000224936 CTL December 2017 Invoice Info needed

Ms. Wallis:

You requested \$377.00 reimbursement for \$626.38 (\$337.38 & \$289.00) for supplies for A Pregnancy Center and Clinic. Please provide the calculations showing how you arrived at the amounts for reimbursement.

Please provide verification of payment of Auditor Service (Michael Choate).

This information is due no later than Tuesday, January 30, 2018.

Jeanine LeBlanc

Jeanine LeBlanc

ES Program Consultant

Dept. Children and Family Services

627 North Fourth Street, 5-321

Baton Rouge, LA 70802

Jeanine.LeBlanc@la.gov

Office 225-342-5417

Fax 225-342-2536

Analysis Percentages by Center:

	Care Prog Clinic	Women's Res. Hatch	A Pregn Center	Access Metairie	Women's Life	Restoration House	CPC Gonzales	TOTALS
Total Services	2,860	1,312	1,880	468	327	988	323	8,158
%	35%	16%	23%	6%	4%	12%	4%	100%
Total Home Outreach	103	55	50	-	16	38	10	272
%	38%	20%	18%	0%	6%	14%	4%	100%
Total Intakes	414	155	231	70	36	131	67	1,104
%	38%	14%	21%	6%	3%	12%	6%	100%
Average per about stats	37%	17%	21%	4%	4%	18%	5%	100%
Office Supplies % paid	25%	18%	21%	6%	10%	18%	4%	100%

The average of the above statistics indicate our average is indicative of what we paid our Subs, except for Women's Life—we gave them a larger share and took from CPC

The above stats also show we base our Office Supply budgets on their performance of services.

O • C

O • C

337 • 38 *
21 • 01 %
0 • C 70 • 883538 *

O • C O • C

15 • 53 +	289 • x
6 • 47 +	21 • 01 %
21 • 01 +	60 • 7189 *
18 • 39 +	
9 • 67 +	O • C
25 • 03 +	
3 • 9 +	70 • 88 +
100 • *	60 • 72 +
0 • C	131 • 6 *

O • C

med 4/29/18 J

P.O. # 2000 224936-1217
 Section D-Operating Expenses
 Office Supplies Summary

	<u>Amt Spent</u>	<u>Reimbursed</u>	<u>%</u>
<u>Restoration Pregnancy Resource Center</u>			
12/22/2017 Office Depot	8.79		
12/22/2017 Best Buy	118.78		
12/22/2017 Office Depot	<u>151.03</u>		
Total Restoration Preg. Res. Center	\$ 278.60		
<i>LCP Reimbursement for Office Supplies</i>		\$ 278.60	15.53%
<u>Access/Metairie (Catholic Charities)</u>			
12/7/2017 Office Depot	<u>135.53</u>		
Total Access/Metairie-Catholic Charities	\$ 135.53		
<i>LCP Reimbursement for Office Supplies</i>		\$ 116.00	5.47%
<u>A Pregnancy Center and Clinic</u>			
12/11/2017 Office Depot	337.38		
12/11/2017 TechSoup	<u>289.00</u>		
Total for A Pregnancy Center and Clinic	\$ 626.38		
<i>LCP Reimbursement for Office Supplies</i>		\$ 377.00	21.01%
<u>Women's Resource Ctr of Natchitoches</u>			
12/27/2017 Amazon.com	232.71		
12/27/2017 Amazon.com	44.79		
12/27/2017 Amazon.com	<u>55.20</u>		
Total for Women's Res Ctr of Natchitoches	\$ 332.70		
<i>LCP Reimbursement for Office Supplies</i>		\$ 330.00	18.39%
<u>Women's Life Ministries</u>			
12/13/2017 Office Depot	<u>173.42</u>		
Total Women's Life Ministries	\$ 173.42		
<i>LCP Reimbursement for Office Supplies</i>		\$ 173.42	9.67%
<u>Care Pregnancy Clinic</u>			
12/27/2017 Sam's Club	<u>449.44</u>		
Total Care Pregnancy Clinic	\$ 449.44		
<i>LCP Reimbursement for Office Supplies</i>		\$ 449.00	25.03%
<u>CPC-Gonzales Clinic</u>			
12/28/2017 Sam's Club	<u>70.75</u>		
Total CPC-Gonzales Clinic	\$ 70.75	\$ 70.00	3.90%
GRAND TOTAL OFFICE SUPPLIES ALL CENTERS REIMBURSED		<u>\$ 1,794.02</u>	

Next 1/29/18
 J

P.O. # 2000 224936-1217
 Section D-Operating Expenses
 Office Supplies Summary

	<u>Amt Spent</u>	<u>Reimbursed</u>
<u>Restoration Pregnancy Resource Center</u>		
12/22/2017 Office Depot	8.79 ✓	
12/22/2017 Best Buy	118.78 ✓	
12/22/2017 Office Depot	151.03 ✓	
Total Restoration Preg. Res. Center	\$ 278.60	
<i>LCP Reimbursement for Office Supplies</i>	<i>\$ 278.60</i>	
<u>Access/Metairie (Catholic Charities)</u>		
12/7/2017 Office Depot	135.53 ✓	
Total Access/Metairie-Catholic Charities	\$ 135.53	
<i>LCP Reimbursement for Office Supplies</i>	<i>\$ 116.00</i>	
<u>A Pregnancy Center and Clinic</u>		
12/11/17 Office Depot	337.38 ✓	
12/11/17 TechSoup Computer	289.00 ✓	
Total for A Pregnancy Center and Clinic	\$ 626.38	
<i>LCP Reimbursement for Office Supplies</i>	<i>\$ 327.00</i>	<i>88.00</i>
<u>Women's Resource Ctr of Natchitoches</u>		
12/27/2017 Amazon.com	232.71 ✓	
12/27/2017 Amazon.com	44.79 ✓	
12/27/2017 Amazon.com	55.20 ✓	
Total for Women's Res Ctr of Natchitoches	\$ 332.70	
<i>LCP Reimbursement for Office Supplies</i>	<i>\$ 330.00</i>	
<u>Women's Life Ministries</u>		
12/13/2017 Office Depot	173.42 ✓	
Total Women's Life Ministries	\$ 173.42	
<i>LCP Reimbursement for Office Supplies</i>	<i>\$ 173.42</i>	<i>63.43</i>
<u>Care Pregnancy Clinic</u>		
12/27/2017 Sam's Club	449.44 ✓	
Total Care Pregnancy Clinic	449.44	
<i>LCP Reimbursement for Office Supplies</i>	<i>\$ 449.00</i>	
<u>CPC-Gonzales Clinic</u>		
12/28/2017 Sam's Club	70.75 ✓	
Total CPC-Gonzales Clinic	70.75	\$ 70.00
GRAND TOTAL OFFICE SUPPLIES ALL CENTERS REIMBURSED		
		<u>794.02</u>

Order Number: 991980141-001
Order Placed: 4/27/2017
Tracking #: 129Y68R0033474734
Status: Shipped
Order Placed By: RESTORATIONHAMMOND@GMAIL.COM

SECTION D-Operating Expenses

Order Placed to Reimburse CTR

LCP Budget to reimburse CTR

Payment Method: Credit Card
Card # 4123456789012345
Expiry Date: 04/18
Amount: \$8.79
Category: Supplies

Billing Address:
RESTORATION
PREGNANCY
RESOURCE
101 S SPRUCE ST
HAMMOND, LA
70403
(985) 542 - 0492
ACCOUNTING@RHPRC.
COM

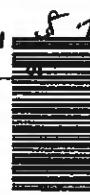
Payment Method: Credit Card
Card # 4123456789012345
Expiry Date: 04/18
Amount: \$8.79
Category: Supplies

Payment Method: Credit Card
Card # 4123456789012345
Expiry Date: 04/18
Amount: \$8.79
Category: Supplies

Comments:

Item Description	Qty	Shipped	Price	Total	Reorder
AT-A-GLANCE® Monthly Easel Calendar, 6 3/8 x 6 1/16", Between The Lines, January to December 2018 Item # 449099 Review This Product	1	1	\$7.99 /each	\$7.99	1

Page



Subtotal: \$7.99
Delivery Fee: \$0.00
Tax Exempt Taxes: \$0.80

2 of 3

12/30/2017, 2:51 PM

1 of 2

39

Total: \$8.79

Status
Shipped
Shipped

Delivery Date
12/26/2017
12/26/2017

Total
\$151.03
\$8.79

Related Orders
Order number
#001980118-001
#01980141-001
#936-1217

SECTION D-Operating Expense-Office Supplies

CP Budget to reimburse CTLM = \$278.60 for Restoration Pregnancy Resource Ctr

Page 2 of 7

2 of 2

40

3 of 3

12/30/2017, 2:51 PM

Order Number: BBY01-805522895616

Order Summary

Order Status:	Shipped
2 items	
Payment Method	
Visa ****7436	
\$118.78	Order Total

Item Details

Brother - TN660 Toner Cartridge - Black

Model: TN-660
SKU: 6131208
Quantity: 2

Shipping Address

Beth Davis
101 S SPRUCE ST
HAMMOND, LA 70403 US

Item Total	\$118.78
Product Price	\$107.98
Sales Tax, Fees & Surcharges	\$10.80

Page 3 of 3

Status: Shipped
Quantity: 2

Good news! Your order is on its way.
UPS Tracking Number: 1ZWF25470392831366

12/30/2017, 2:54 PM

1 of 1

41

Office DEPOT[®]

OfficeMax[®]

Taking care of business

Order Number: 991980116-001
 Order Placed: 12/22/2017
 Tracking #: 1Z870A190301133874

Status: Shipped

Order Placed By: RESTORATIONHAMMOND@GMAIL.COM

Payment Method: Credit Card
 Order ID: 7436
 Amount: \$151.03
 Order Type: Expense Supplie
 Order Status: Processing

CP Budget to reimburse CTLM = \$278.60

Shipped

Received

Billing Address:
 RESTORATION
 PREGNANCY
 RESOURCE
 101 S SPRUCE ST
 HAMMOND, LA
 70403
 (985) 542 - 0492
 ACCOUNTING@RHPRC.
 COM

Comments:

Item Description	Qty Shipped	Price	Total	Reorder	<input checked="" type="checkbox"/>
Office Depot® Brand Monthly Desk Pad Calendar, 17" x 11", 30% Recycled, White, January to December 2018 (OD2010-00-18) Item # 865929 Review This Product	2	\$10.99 /each	\$21.98	2	<input checked="" type="checkbox"/>

Smead® Color File Folders, Letter Size, 1/3 Cut, Purple, Box Of 100 Item # 572750 Review This	2	\$19.99 /box	\$39.98	2	<input checked="" type="checkbox"/>
--	---	--------------	---------	---	-------------------------------------

1 of 3

12/30/2017, 2:50 PM

Section	Description	Qty Shipped	Price	Total	Reorder	checkbox
	Product					
PO# 2000 224936-1217	Neenah Astrobrights® Bright Color Paper, Letter Size Paper, 24 Lb, FSC Certified, Terra Green, Ream Of 500 Sheets Item # 364065 Review This Product	1 1	\$13.99 /ream	\$13.99 1	<input checked="" type="checkbox"/>	
Xerox® Vitality Colors™ Multipurpose Printer Paper, Letter Size Paper, 20 Lb, 30% Recycled, Ivory, Ream Of 500 Sheets Item # 345694 Review This Product		1 1	\$11.99 /ream	\$11.99 1	<input checked="" type="checkbox"/>	
Xerox® Vitality Colors™ Multipurpose Printer Paper, Letter Size Paper, 20 Lb, 30% Recycled, Lilac, Ream Of 500 Sheets Item # 478156 Review This Product		1 1	\$11.99 /ream	\$11.99 1	<input checked="" type="checkbox"/>	
Xerox® Vitality Colors™ Multipurpose Printer Paper, Letter Size Paper, 20 Lb, 30% Recycled, Salmon, Ream Of 500 Sheets Item # 478123 Review This Product		1 1	\$11.99 /ream	\$11.99 1	<input checked="" type="checkbox"/>	
Office Depot® Brand White Permanent Inkjet/Laser File Folder Labels, 2/3" x 3 7/16", White, Pack Of 750 Item # 220472 Review This Product		1 1	\$22.99 /pack	\$22.99 1	<input checked="" type="checkbox"/>	
20% Off Your Highest Priced It		1	(\$4.60)	(\$4.60)		

Page 5 of 7



43

3

12/30/2017, 2:50 PM

Item Description	Qty Shipped	Price	Total	Reorder
FW781RCPY4G6R FAX P Budget to reimburse CT ACTION Duplicating Expenses Office Supplies # 2000 224936-1217	1	\$6.99 /pack	\$6.99	<input checked="" type="checkbox"/>

Office Depot® Brand Removable
Inkjet/Laser Multipurpose Round
Labels, 3/4" Diameter, White, Pack
Of 1,008 Item # 660534 Review
This Product

Coupons / Delivery Fee Adjustments / Other Discounts: (\$4.60)
Subtotal: \$141.90
Delivery Fee: \$0.00
Tax Exempt Taxes: \$13.73

Total: \$151.03

You Saved \$4.60 on this order!

Related Orders	Order number	Delivery Date	Status
	991980118-001	12/26/2017	Shipped
	991980141-001	12/26/2017	Shipped

Page 6 of 7



830 for Restoration Pregnancy
Resource Ctr

12/30/2017, 2:50 PM

44
3913

1/9/2018

Gulf Coast Bank and Trust



Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59186	LCP CHECKING xxxxx6649	\$278.60

Tracking ID: 59186 **Total Amount:** \$278.60

Created: 01/09/2018 10:55 AM **Total Payments:** 1

Created By: DOROTHY WALLIS

From: LCP CHECKING xxxxx6649

Authorized: 01/09/2018 10:56 AM

ACH Class Code: CCD

Authorized By: DOROTHY WALLIS

ACH Header: CARING TO LOVE M

Will process On: 1/9/2018

Effective: 1/10/2018

RECIPIENTS:

Name	ACH Name	ACH id	Amount	Account Number	Account Type	Routing Number	Email Address
RESTORATION PREGNANCY	RESTORATION PREGNANCY	59186	\$278.60	XXXXX6649	Checking	XXXXX5459	

Addenda: Restoration Ofc Supply

APPROVAL(S):

1 DOROTHY WALLIS

PO# 2000 224936-1217

Page 1 of 1

SECTION D-Operating Expense-Office Supplies

LCP Budget to reimburse CTLM = \$278.60 for Restoration Pregnancy Resource Ctr

45

Received Fax Dec 13 17 04:29p Received by J Ham page 2
DEC-13-2017 03:28P FROM: ST.VINCENT@*** 5048376235 TO: 13182551259 P.2/2
Office Supplies: Office Products and Office Furniture: Office Depot Page 1 of 1



Taking care of business

Order Detail

Order & Budget Information

Order Number: 987713432-001 Status: 3 Days Delivery Pending
Order Date: 12/07/2017 Delivery Date/Time: 12/11/2017
Ordered By: MKUGELMANN@CCANO.ORG
Last Modified By: ODORDERS@CCANO.ORG Comments:
Last Modified On: 12/12/2017

Purchase order
for ~~ACCESS~~
Pregnancy Center

Shipping Information

Shipping Address:
ACCESS CATHOLIC CHARITIES
921 AIRS AVE
METAIRIE, LA70005-2207 USA

Billing Information

Billing Contact: APPMR
MADELINE KUGELMANN MICHELLE BLACK
(504)838-5278 Ext.0000 Payment Method:
Account Billing Amount: \$133.03

Workflow Status

Status	Details	Comments
Approved	by MICHELLE BLACK on 12/07/2017 at 23:10:58	
Released	by RENEE DAVENPORT on 12/13/2017 at 08:18:47	

Order Summary

Description	Your Price / Unit	Quantity	Stock Ordered EOQ	Shipped	Total	Reorder Price / Unit	<input checked="" type="checkbox"/>
Box # 432241Advise 10-Sheet Micro-Cut Shredder	\$123.49 / each	1	0	0	\$123.49	\$123.49 / each	<input type="checkbox"/>

Comments:

Subtotal:	\$123.49
Delivery Fee:	\$0.00
Adjustments:	\$0.00
Taxes:	\$12.04
Total:	\$135.03

PO# 2000 224936-1217

Page 1 of 2

SECTION D-Operating Expense-Office Supplies

LCP Budget to reimburse CTLM = \$116.00 for Access

1/9/2018

Gulf Coast Bank and Trust



Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59189	LCP CHECKING xxxxx6649	\$116.00

Tracking ID: 59189 Total Amount: \$116.00

Created: 01/09/2018 10:57 AM Total Payments: 1

Created By: DOROTHY WALLIS From: LCP CHECKING xxxxx6649

Authorized: 01/09/2018 10:57 AM ACH Class Code: CCD

Authorized By: DOROTHY WALLIS ACH Header: CARING TO LOVE M

Will process On: 1/9/2018

Effective: 1/10/2018

RECIPIENTS:

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
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CATHOLIC CHARITIES	CATHOLIC CHARITIES		\$116.00	XXXXX21274	Checking	XXXXX0137	
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Addenda: Catholic Charities-Office Supply

APPROVAL(S):

1	DOROTHY WALLIS
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PO# 2000 224936-1217

Page 2 of 2

SECTION D-Operating Expense-Office Supplies

LCP Budget to reimburse CTLM = \$116.00 for Access

47

1/9/2018

Office Depot Receipt.jpeg

Office DEPOT
OfficeMax

LAFAYETTE - (337) 234-9900
1/9/2018 10:20 PM



221168PYM3XGR48U

SALE	385-3-6850-629981-17.9.2
196697 PPR,POLARIS,11	
2 @ 63.99	127.98
Instant Savings	-48.00
Retail After Discounts	79.98
Business Solutions Prc	121.580
You Pay	79.98SS
381279 CARD,ROLDX,2.2	
3 @ 3.29	9.87
Business Solutions Prc	11.040
You Pay	9.87SS
713800 INK,T262XL,BLA	
4 @ 37.99	151.96
Business Solutions Prc	125.96
You Pay	125.96SS
355409 NOTES,POST-IT,	14.69SS
Business Solutions Prc	10.92
You Pay	10.92SS
193031 TONER 410A BLA	91.99SS
Business Solutions Prc	82.79
You Pay	82.79SS
Subtotal:	309.52
Sales Tax:	27.86
Total:	337.38
Visa 0502:	337.38

AUTH CODE 066950

TDS Chq Read

AID A0000000980840 US DEBIT

TVR 8000088000

CVS No Signature Required

SPC CARD# 1351

Total Savings:
\$86.97

XXXXXXXXXXXXXXXXXXXXXX

WE WANT TO HEAR FROM YOU!

Participate in our online customer survey and receive a coupon for \$10 off your next qualifying purchase of \$50 or more on office supplies, furniture and more. (Excludes Technology. Limit 1 coupon per household/business.)

www.TellOfficeDepot.com
and enter the survey code below:
14XR 289C 6HJK

XXXXXXXXXXXXXXXXXXXXXX

PO# 2000 224936-1217

Page 1 of 3

SECTION-B-Operating-Expense-Office Supplies

LCP Budget to reimburse CTLM = \$377.00 Budgeted for A Pregnancy Center

rachelw@cox-internet.com

From: [REDACTED] TechSoup Center and Clinic <apcc@glacoxmail.com>
Sent: Monday, December 11, 2017 3:30 PM
To: Rachel Washington
Subject: FW: Confirmation of Request Number 2045317

Receipt. Will use for LCP. Thanks.

From: TechSoup [mailto:customerservice@techsoup.org]
Sent: Monday, December 11, 2017 3:27 PM
To: Patrice Lewis
Cc: apcc@glacoxmail.com
Subject: Confirmation of Request Number 2045317

We're processing your request.



Thanks for requesting a donation through TechSoup.

Hi, A Pregnancy Center and Clinic.

We'll process your request in approximately two to three business days. For most donations, you'll receive another email at that time with detailed instructions about how to obtain your donation.

During checkout, you selected the option to pay by credit card. Your card will be charged when fulfillment is complete.

If your organization's nonprofit status is not yet verified by us, the donation request will not be fulfilled until we've confirmed your eligibility.

You can view the status of your request at any time in your account.

If this request was not placed by you or your organization, please contact us immediately.

Products Requested

Title: HP Compaq 8200 Elite Desktop, Core i5, Windows 10 (Condition B)
Quantity: 1
Item Price: \$289.00

Brummett

1

PO# 2000 224936-1217

SECTION D-Operating Expense-Office Supplies

LCP Budget to reimburse CTLM = \$377.00 Budgeted for A Pregnancy Center

Computer
- 289.00



Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59195	LCP CHECKING xxxxx6649	\$377.00

Tracking ID: 59195

Created: 01/09/2018 10:58 AM

Created By: DOROTHY WALLIS

Authorized: 01/09/2018 10:59 AM

Authorized By: DOROTHY WALLIS

Will process On: 1/9/2018

Effective: 1/10/2018

RECIPIENTS:

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
A PREGNANCY CENTER C	A PREGNANCY CENTER C		\$377.00	XXXX2775	Checking	XXXX0222	

Addenda:

APCC-Ofc Supplies

APPROVAL(S):

1 DOROTHY WALLIS

PO# 2000 224936-1217

Page 3 of 3

SECTION D-Operating Expense-Office Supplies

LCP Budget to reimburse CTLM = \$377.00 Budgeted for A Pregnancy Center

amazon smile

Details for Order #111-6520351-9902627
Print this page for your records.

Order Placed: December 27, 2017

Amazon.com order number: 111-6520351-9902627

Order Total: \$232.71

Supporting: Women's Resource Center of Natchitoches

Invoice#1

Not Yet Shipped

Items Ordered

		Price
1 of:	<i>EXPO Low-Odor Dry Erase Set, Ultra Fine Tip, Assorted Colors, 7-Piece</i>	\$9.48
Sold by:	Amazon.com LLC	
Condition:	New	
1 of:	<i>Smead Hanging File Folder with Tab, 1/3-Cut Adjustable Tab, Legal Size, Standard Green, 25 per Box (64135)</i>	\$11.58
Sold by:	Amazon.com LLC	
Condition:	New	
5 of:	<i>Springhill, Digital Card Ivory, 110lb, Letter, 8.5 x 11, 250 Sheets / 1 Ream, (056300R) Made In The USA</i>	\$6.32
Sold by:	Amazon.com LLC	
Condition:	New	
6 of:	<i>AmazonBasics A9 Invitation Envelope, Peel & Seal, White, 100-Pack</i>	\$7.99
Sold by:	Amazon.com LLC	
Condition:	New	
3 of:	<i>100 9 x 12 SELF SEAL Security White Catalog Envelopes - 28lb - Security Tinted, Ultra Strong QUICK-SEAL, 9 x 12 Inch (38100)</i>	\$15.77
Sold by:	Quality Business Products (seller profile)	
Condition:	New	
1 of:	<i>Pendaflex Extra Capacity Reinforced Hanging File Folders, 2", Legal Size, Standard Green, 1/5 Cut, 25/BX (4153x2)</i>	\$21.13
Sold by:	Amazon.com LLC	
Condition:	New	
4 of:	<i>Pendaflex Speedframe Hanging Folder Frame, 1 per Box, (450EE)</i>	\$13.17
Sold by:	Amazon.com LLC	
Condition:	New	

Shipping Address:

Beverly Jean Broadway
261 JOHNNIE FLOYD RD
ROBELINE, LA 71469-5013
United States

Shipping Speed:

Two-Day Shipping

Payment Information

Payment Method: 1217
MasterCard | Last digits: 0229

SECTION D-Operating Expense-Office Supplies
Billing address: Beverly Broadway

LCP Budget to reimburse \$330.00 for Women's Resource Center-Nathitoches

Item(s) Subtotal: \$221.72
Shipping & Handling: \$0.00
Promotion applied: -\$4.73
Page 1 of 5

Received Fax: Dec 27 17 01:53p
Dec 27 17, 01:55p

WRC

Received by J Ham

3183524188

page.4

p.4

107 NORTH ST
NATCHITOCHES, LA 71457-3945
United States

Total before tax: \$216.99
Estimated tax to be collected: \$15.72

Grand Total: \$232.71

To view the status of your order, return to [Order Summary](#).

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PO# 2000 224936-1217

Page 2 of 5

SECTION D-Operating Expense-Office Supplies

LCP Budget to reimburse \$330.00 for Women's Resource Center-Nathitoches

52

amazon smile

Details for Order #111-3603883-0990642
Print this page for your records.

Order Placed: December 27, 2017
Amazon.com Order Number: 111-3603883-0990642
Order Total: \$44.79
Supporting: Womens Resource Center of Natchitoches

Invoiced#2

Not Yet Shipped

Items Ordered

		Price
1 of: Neenah Paper Exact Vellum Bristol, 67 lb, 8.5 x 11", 250 Sheets, White, 94 Brightness (80211), 3 pack	Sold by: Amazon.com LLC	\$17.97
Condition: New		
4 of: STPL Staples Binder Clips, Assorted Sizes, Black, 60-Pack	Sold by: Tee Cottons (seller profile)	\$6.30
Condition: New		

Shipping Address:

Beverly Jean Broadway
261 JOHNNIE FLOYD RD
ROBELINE, LA 71469-5013
United States

Shipping Speed:

Standard Shipping

Payment information

Payment Method:

MasterCard | Last digits: 0229

Item(s) Subtotal: \$43.17

Shipping & Handling: \$0.00

Total before tax: \$43.17

Estimated tax to be collected: \$1.62

Grand Total: \$44.79

To view the status of your order, return to [Order Summary](#).

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PO# 2000 224936-1217

Page 3 of 5

SECTION D-Operating Expense-Office Supplies

LCP Budget to reimburse \$330.00 for Women's Resource Center-Nathitoches

amazon smile

Details for Order #111-2374062-8024233
Print this page for your records.

Order Placed: December 27, 2017
Amazon.com Order Number: 111-2374062-8024233
Order Total: \$55.20
Supporting: Womens Resource Center of Natchitoches

Invoice#3

Not Yet Shipped

Items Ordered

	Price
1 of: Sterilite 19334304 32 Quart/30 Liter Gasket Box, Clear with Blue Aquarium Latches and Gasket, 4-Pack	\$55.20
Sold by: Enzoproducts (seller profile)	

Condition: New

Shipping Address:

Beverly Jean Broadway
261 JOHNNE FLOYD RD
ROBELINE, LA 71469-5013
United States

Shipping Speed:

Standard Shipping

Payment information

Payment Method:

MasterCard | Last digits: 0229

Item(s) Subtotal: \$55.20

Shipping & Handling: \$0.00

Total before tax: \$55.20

Estimated tax to be collected: \$0.00

Grand Total: \$55.20

To view the status of your order, return to [Order Summary](#).

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PO# 2000 224936-1217

Page 4 of 5

SECTION D-Operating Expense-Office Supplies

LCP Budget to reimburse \$330,000 for Women's Resource Center-Nathitoches



Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59199	LCP CHECKING xxxxx6649	\$330.00

Tracking ID: 59199 **Total Amount:** \$330.00

Created: 01/09/2018 11:02 AM

Total Payments: 1

Created By: DOROTHY WALLIS

From: LCP CHECKING xxxxx6649

Authorized: 01/09/2018 11:02 AM

ACH Class Code: CCD

Authorized By: DOROTHY WALLIS

ACH Header: CARING TO LOVE M

Will process On: 1/9/2018

Effective: 1/10/2018

RECIPIENTS:

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
WOMENS RES CENT NATCH	WOMENS RESIDENT NATCH		330.00	XXXX078	Checking	XXXXX2949	

Addenda:

WRC-Ofc Supplies

APPROVAL(S):

1 DOROTHY WALLIS

PO# 2000 224936-1217

Page 5 of 5

SECTION D-Operating Expense-Office Supplies

LCP Budget to reimburse ~~\$330.00~~ for Women's Resource Center-Nathitoches

55

**Office DEPOT
OfficeMax**

HAMMOND - (985) 542-9770

1:58 PM



SALE 2111-4-0562-664153-17.9.2
 303389 BLACK, INK, HIGH 24.99 SS
 134000 MRKR, SHARPIE, 6 5.69 SS
 808766 EPSON, EXPRESSI 199.99SS
 Instant Savings -100.00
 You Pay 99.99SS
 478123 PPR, CPY, 600SH, 11.99 SS
 330848 ENV, 288, 10X13, 9.99 SS
 330784 ENV, CLS, 9X12, 2 9.99SS
 Instant Savings -4.99
 You Pay 6.00SS
 Subtotal: 167.66
 Sales Tax: 16.77
 Total: 184.43
 Visa 184.43

AUTH CODE 011047
 TOS Chip Read
 AID A000000031010 Capital One Visa
 TVR 8000008000
 CVS Signature Verified

TERESA RAQUUSA 1624309802
 Congratulations! You've reached VIP
 rewards status. You'll now get 6% back
 on paper, ink, toner & copy/print/ship
 services PLUS 2% back on everything
 else. Visit officedepot.com/rewards to
 view all benefits of being a VIP
 Member.

Total Savings:
 \$104.99

XXXXXXXXXXXXXXXXXXXXXX
 WE WANT TO HEAR FROM YOU!

Participate in our online customer
 survey and receive a coupon for
 \$10 off your next qualifying
 purchase of \$50 or more on
 office supplies, furniture and more.
 (Excludes Technology. Limit 1 coupon per
 household/business.)

Visit www.officedepot.com/feedback
 and enter the survey code below:
 V4XR PFRX ETTS

XXXXXXXXXXXXXXXXXXXXXX
 Page 1 of 2

PO# 2000 224936-1217

SECTION D-Operating Expense-Office

LCP Budget to reimburse

Printer

12 2018

DCFS
nic Stability

56



Created ▾ Status ▾ Approvals ▾ Transaction Type ▾ Account ▾ Amount ▾

1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59202	LCP CHECKING xxxxx6649	\$173.42
----------	------------	--------	--------------------------------	------------------------	----------

Tracking ID: 59202

Created: 01/09/2018 11:03 AM

Created By: DOROTHY WALLIS

Authorized: 01/09/2018 11:03 AM

Authorized By: DOROTHY WALLIS

Will process On: 1/9/2018

Effective: 1/10/2018

RECIPIENTS:

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
WOMENS LIFE MINISTRIES	WOMENS LIFE MINISTRIES		\$173.42	XXXXX24618	Checking	XXXXX5690	

Addenda:

WLM-Ofc Supplies

APPROVAL(S):

1 DOROTHY WALLIS

PO# 2000 224936-1217

Page 2 of 2

SECTION D-Operating Expense-Office Supplies

LCP Budget to reimburse \$173.42 for Women's Life Ministries

57



Thank you, your order is complete

A copy of your receipt has been sent to your email address

Items you have already paid for:

Order Date: Dec 22, 2001		Order Number: 196809059	
Items we're shipping to you <i>CPC</i>			
ITEMS TO BE SHIPPED	SHIPPING METHOD	QTY	TOTAL
Universal® File Folders, 1/3 Cut One-Ply Top Tab, Letter, Blue/Light Blue, 100/Box	FREE - Standard Shipping Arrives between Dec 29 - Jan 02	1	\$14.98
Item #: 980080211			
Boise - Fireworx Colored Paper, 20lb, Crackling Canary - Ream	FREE - Standard Shipping Arrives between Dec 29 - Jan 02	4	\$24.72
Item #: 555739			
Boise - Fireworx Colored Paper, 20lb, Flashing Ivory - Ream	FREE - Standard Shipping Arrives between Dec 29 - Jan 02	4	\$24.72
Item #: 555710			
Boise - Fireworx Colored Paper, 20lb, Luminous Lavender - Ream	FREE - Standard Shipping Arrives between Dec 29 - Jan 02	4	\$24.72
Item #: 555753			
Boise - FIREWORX Colored Paper, 20lb, 8-1/2 x 11, Turbulent Turquoise - 500 Sheets/Ream	FREE - Standard Shipping Arrives between Dec 29 - Jan 02	4	\$24.72
Item #: 181852			
Office Impressions - Standard Staples, 5,000 Count - 5 Packs	FREE - Standard Shipping Arrives between Dec 29 - Jan 02	2	\$8.96
Item #: 950660			
Member's Mark Copy Paper, 20lb, 92 Bright, 8-1/2 x 11" - Case	FREE - Standard Shipping Arrives between Dec 29 - Jan 02	4	\$103.92
Item #: 865123			
\$3.00 off with Instant Savings			
PO# 2000 22422-1217 Member's Mark Tall Kitchen Simple Fit Drawstring Bags (13gal., 200ct.)	FREE - Value Shipping Arrives between Jan 02 - Jan 11	1	\$14.78
Item #: 591025			
SECTION D-Operating Expense-Office Supplies			
LCP Budget to Reimburse CTLM = \$449.00 for Care Pregnancy Clinic	FREE - Standard Shipping Arrives between Dec 29 - Jan 02	1	\$41.98

<p>Georgia Pacific - Spectrum Standard 92 Multipurpose Paper, 20lb, 11 x 17, White - 2500 Sheets/Ctn</p> <p>Item #: 255731</p>					
	Wausau - Exact Index Card Stock, 110lb, White - 250 Sheets	FREE - Standard Shipping Arrives between Dec 29 - Jan 02	5	\$39.40	
	Item #: 352541				
	Avery Hi-Liter Bonus Pack	FREE - Standard Shipping Arrives between Dec 29 - Jan 02	1	\$7.98	
	Item #: 230450				
	Georgia Pacific - Spectrum Standard 92 Multipurpose Paper, 20lb, 8-1/2 x 14, White - 5000 Sheets/Ctn	FREE - Standard Shipping Arrives between Dec 29 - Jan 02	1	\$52.98	
	Item #: 255738				
	Boise - Fireworx Colored Paper, 20lb, Bottle Rocket Blue - Ream	FREE - Standard Shipping Arrives between Dec 29 - Jan 02	2	\$12.36	
	Item #: 555725				
	Boise - Fireworx Colored Paper, 20lb, Powder Pink - Ream	FREE - Standard Shipping Arrives between Dec 29 - Jan 02	2	\$12.36	
	Item #: 555889				
Billing Address: Deborah Clayton 3813 N Flannery Road Baton Rouge, LA 70791	Payment Method: VISA : xxxx-xxxx-xxxx-3746		Subtotal <small>(includes savings)</small>	\$408.58	
			Shipping:	\$0.00	
			Tax:	\$40.88	
			Shipped Order Total:	\$449.44	
Your savings: \$12.00					

Have Questions? One of our associates will be happy to help you. Call us at 1-888-746-7726. Leave Feedback.

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Page 2 of 3

SECTION D-Operating Expense-Office Supplies

LCP Budget to reimburse CTLM = \$449.00 for Care Pregnancy Clinic



Created	Status	Approvals	Transaction Type	Account	Amount
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1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59206	LCP CHECKING xxxxx6649	\$449.00
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Tracking ID: 59206

Created: 01/09/2018 11:04 AM

Created By: DOROTHY WALLIS

Authorized: 01/09/2018 11:05 AM

Authorized By: DOROTHY WALLIS

Will process On: 1/9/2018

Effective: 1/10/2018

RECIPIENTS:

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
CARE PREGNANCY CLINIC	CARE PREGNANCY CLINIC		\$449.00	XXXX6569	Checking	XXXXX0153	

Addenda:

CPE-Ofc Supplies

APPROVAL(S):

1 DOROTHY WALLIS

PO# 2000 224936-1217

Page 3 of 3

SECTION D-Operating Expense-Office Supplies

LCP Budget to reimburse CTLM = \$449.00 for Care Pregnancy Clinic

60



Thank you, your order is complete

A copy of your receipt has been sent to your email address

Items you have already paid for:

Order Date: Dec 28, 2017		Order Number: 723738172	
Items we're shipping to you <i>LPC-Gonzales</i>			
ITEMS TO BE SHIPPED	SHIPPING METHOD	QTY	TOTAL
Member's Mark Copy Paper, 20lb, 92 Bright, 8-1/2 x 11" - Case Item #: 665123 \$3.00 off with Instant Savings	FREE - Standard Shipping Arrives by Jan 02	2	\$51.96
Boise - Fireworx Colored Paper, 20lb, Crackling Canary - Ream Item #: 555739	FREE - Standard Shipping Arrives by Jan 02	2	\$12.36
Billing Address: Deborah Clayton 3813 N Flannery Road Baton Rouge, LA 70791	Payment Method: VISA : xxxx-xxxx-xxxx-3746	Subtotal (includes savings) \$84.32	
		Shipping: \$0.00	
		Tax: \$6.43	
		Shipped Order Total: \$70.75	
Your savings: \$6.00			

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Page 1 of 2

SECTION D-Operating Expense-Office Supplies

LCP Budget to reimburse CTLM ~~=\$449.00~~ for Care Pregnancy Clinic-Gonzales

61



Created ▾ Status ▾ Approvals ▾ Transaction Type ▾ Account ▾ Amount ▾

1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59207	LCP CHECKING xxxxx6649	\$70.00
----------	------------	--------	--------------------------------	------------------------	---------

Tracking ID: 59207

Total Amount: \$70.00

Created: 01/09/2018 11:06 AM

Total Payments: 1

Created By: DOROTHY WALLIS

From: LCP CHECKING xxxxx6649

Authorized: 01/09/2018 11:06 AM

ACH Class Code: CCD

Authorized By: DOROTHY WALLIS

ACH Header: CARING TO LOVE M

Will process On: 1/9/2018

Effective: 1/10/2018

RECIPIENTS:

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
CARE PREGNANCY CLINIC	CARE PREGNANCY CLINIC		\$70.00	XXXX6569	Checking	XXXXX0153	

Addenda:

CPC-Gonzales-Ofc Supplies

APPROVAL(S):

1 DOROTHY WALLIS

PO# 2000 224936-1217

Page 2 of 2

SECTION D-Operating Expense-Office Supplies

LCP Budget to reimburse CTLM = \$449.00 for Care Pregnancy Clinic-Gonzales

62



DE LAGE LANDEN FINANCIAL SERVICES, INC.
PO BOX 41602
PHILADELPHIA, PA 19101-1602

REMITTANCE SECTION

Invoice Number: 57475402
Due Date: 01/15/2018
Due This Period: \$555.75

**CARE PREGNANCY CLINIC
ATTN AP
3813 N FLANNERY RD
BATON ROUGE LA 70814-8002**

Please make check payable to:

DE LAGE LANDEN FINANCIAL SERVICES, INC.
PO BOX 41602
PHILADELPHIA, PA 19101-1602

Digitized by srujanika@gmail.com

2100000574754020000555751

Detach here. Please include the top payment coupon with your payment. Please allow 5-7 days for U.S. Postal Service delivery.



DE LAGE LANDEN FINANCIAL SERVICES, INC.
PO BOX 41602
PHILADELPHIA, PA 19101-1602
800-736-0220

Contract Number:	25427116
Invoice Number:	57475402
Account Number:	854059
Site Number:	3951293
Invoice Date:	12/23/2017
Period of Performance:	12/15/2017-01/14/2018
Due This Period:	\$555.75

Visit www.jesseedirect.com

IMPORTANT MESSAGES

Did you know you can...

- ✓ View copies of your contract and open invoices
- ✓ Enroll in paperless invoicing
- ✓ Make a payment
- ✓ Set up automated/recurring payments

***Please review your equipment location(s) for tax purposes.**

See Reverse For Important Information

INVOICE DETAILS

Description	Payment Amount	Tax	Total Amount	Applied Amount	Remaining Amount Due
PAYMENT	\$480.89	\$48.10	\$528.99	\$0.00	\$528.99
INSURANCE	\$24.34	\$2.42	\$26.76	\$0.00	\$26.76
Billed this Invoice	\$505.23	\$50.52	\$555.75	\$0.00	\$555.75
Balance Due Previous Invoices					\$0.00
Total Amount Due					\$555.75

(Please see the following pages for details.)

ASSET DETAILS

Asset Amount Total: \$528.99

Copy machine \$250.

63

Confirmation

Thank You! Your payment has been made.

CARE PREGNANCY CLINIC

ATTN A P
3813 N FLANNERY RD
BATON ROUGE, LA 70814

Payment Date	12/27/2017
Payment Method	CTLM Operating WHITNEY BANK ****6569
Total Payment	\$555.75

You have been provided a confirmation number. Please save this page for your records.

Payments confirmed before Tuesday, December 26, 2017 12:00 PM ET will be posted on Tuesday, December 26, 2017. Payments confirmed after Tuesday, December 26, 2017 12:00 PM ET will be posted on Wednesday, December 27, 2017.

If you have any further questions about payments to Lease Direct, please contact our office at 800-736-0220 .

Confirmation #	Account Nbr - Site ID	Invoice Date	Invoice Number	Due Date	Amount Due	Payment Amount
3105493596	854059-3951293	12/23/2017	57475402	1/15/2018	\$555.75	\$555.75

PO# 2000 224936-1217

Page 2 of 2

SECTION D-Operating Expense-Copy Machine

LCP Budget to reimburse CTLM = \$250.00 DeLage Landen Financial Services, Inc.

64



**Invoice No. LCP-121317017
P.O.# 2000 224936**

INVOICE

Customer

Name Life Choice Project
Address 3813 N. Flannery Road
City Baton Rouge State LA ZIP 70814
Phone 225-273-1124

Date 12/31/2017

Payment

Please make check payable to:

Caring to Love Ministries
3813 N. Flannery Road
Baton Rouge, LA 70814

Office Use Only

PO# 2000 224936-1117

SECTION D-Operating Expense-Internet

LCP Budget to reimburse CTLM = \$195.00 AT&T

65



AT&T

CARING TO LOVE MINISTRIES
INC
3813 N FLANNERY RD
BATON ROUGE, LA 70814

Page	1 of 4
Account Number	171-000-0934-001
Billing Date	Dec-19-2017
Questions?	1 800 358-1111
Web Site	att.com
Invoice	8821329302
AT&T Tax ID	13-4924710

Invoice

Bill-At-A-Glance

Previous Bill	721.56
Payment - Thank You!	721.56CR
Adjustments	.00
Balance	.00
Current Charges	721.56
Total Amount Due	\$721.56

Payment Due Date Jan 18, 2018

Billing Summary

For detailed information of your charges go to
www.businessdirect.att.com

Questions? Call: 1 800 358-1111

AT&T Business Services

Group #000001 3813 Flannery Rd Baton Rouge	
Sub-Account #829-000-2551 191	687.08
Sub-Account #831-000-6867 906	34.50
Total Group #000001	721.58
Total Current Charges	721.56

News You Can Use

News You Can Use

ACCOUNT STATUS

Where allowed by law, AT&T may implement late payment interest of no more than 18% annually. Rates will vary based on state regulations. Interest will be calculated based upon daily balances and will be applicable for each day that a delinquent balance is outstanding. This charge will apply to all balances that are delinquent through such time that payment in full is received at AT&T. The late payment interest will be billed on a monthly basis. Accounts billed outside the US will not be charged LPI.

Where allowed by law, AT&T may implement a \$25 service fee for restoration of service if a delinquency has caused an interruption. This fee will be applicable to each account that is being restored and

SECTION D-Operating Expense-Internet

LCP Budget to reimburse CTLM = \$195.00 AT&T

News You Can Use

ACCOUNT STATUS - Continued
will be included on your monthly billing statement.

Thank you for subscribing to Business in a Box

Some products require electronic billing as their official bill media. When electronic billing is the official bill media, an informational statement may be sent containing some of the same information as the electronic bill. The informational statement is not your bill. However, if you choose to mail your payment instead of paying electronically, the informational statement has a tear-off that can be used to submit your payment.

JUST FOR YOUR BUSINESS

Make a statement - by not receiving one. View and download your bill details electronically via View Bills from the BusinessDirect website! This state-of-the-art online bill provides all the information that is necessary to manage your business. Pay, view and download your bill, in one easy step ... and it's FREE! For access to BusinessDirect, and View Bills, Please contact your Account Executive.

Where allowed by law, AT&T will charge a \$25 fee for any payment returned for insufficient funds, applied on your next invoice. AT&T values your business and thanks you for your cooperation in this matter.

REGULATORY NEWS

****Important News About Your Account****

You are requested to provide in writing to AT&T, within six months of this bill, any dispute with respect to the charges on this bill, unless a different notification period applies under your contract, State Tariff and/or Service Guide.

You can reach AT&T either by using the toll free number on your bill, or in writing at the remittance address listed on your bill.

[http://serviceguide.att.com/servicelibrary/business/ext/
state_tariff_buss.cfm](http://serviceguide.att.com/servicelibrary/business/ext/state_tariff_buss.cfm)

Attention Louisiana Customers

At your request, AT&T can place a "freeze" on your preferred carrier selections for local, local toll service or long distance service. A preferred carrier freeze can help protect your account from inadvertent or unauthorized changes to your carrier selections. If you place a preferred carrier freeze on your account, no one will be able to make a change in your carrier selection until you lift the freeze. There is no charge for this service.

This invoice is in reference to the AT&T Garage Contribution Agreement Amendment 1 between Amdocs, Inc. and AT&T Mobility, LLC. Terms of this payment are covered under Section 3 (e) of the Amended Agreement, AT&T Benefits.

If you receive service pursuant to a signed contract or other term agreement with AT&T and it is currently in effect, its terms will govern the provision of your AT&T service.

AT&T's standard contract for detariffed services not covered by a signed contract or term agreement, including expired contracts or term plans that are not renewed, can be found at <http://www.att.com/business/agreement>. Important limits of liability



AT&T Business Credit and Collections

01-09-2018

ATTN: Vickie Davis
Caring To Love Ministries Inc.
3813 N Flannery Rd
Baton Rouge, LA 70814

Account: 1718000934001

Dear AT&T Customer:

Thank you for discussing your account with us today. We processed the following payment electronically on your account as a result of our conversation:

Payment Method: Credit Card
Payment Amount: \$721.56
Confirmation #: 5Q07CSR1Q06NQHR

Sincerely,

AT&T Business Credit and Collection Center

PO# 2000 224936-1217

SECTION D-Operating Expense-Internet

January 9, 2018
LCP Budget to reimburse CTL M = \$195.00 AT&T
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Wufoo.com Bill #2453055
Paid by Credit Card \$14.65 Wufoo.com ***

Wufoo Billing

Wed 12/20/2017 10:02 AM

To: webdevelopment webdevelopment <webdevelopment@ctlm.org>; luv luv <luv@ctlm.org>;



Infinity Box Inc.	Billed To :
3050 South Delaware Street	Dorothy H Wallis
San Mateo, CA 94403	3813 N. Flannery Road
United States	70814
	United States

2017-12-20

Transaction ID: # 2453055

Wufoo Bill

Thanks for your payment! This email confirms that your credit card ending in 0848 was charged \$14.95 for your Wufoo subscription. This transaction will appear on your credit card statement from "Wufoo.com/charge/" Please keep a copy of this bill for your records and for future reference. If you have any questions, comments, or concerns about this bill, please send them on to billing@wufuu.com

Your subscription will automatically renew and you'll be billed \$14.95 each month until you cancel it. See [Cancellation Information](#) for more details.

Thanks again for using Wufoo and happy form building!

68

Sources for Women

A ministry of Caring To Love Ministries
3813 N Flannery Rd
Baton Rouge, LA 70814

**Invoice No. LCP-12/31/2017
P.O.# 2000 224936**

INVOICE

Customer

Name Life Choice Project
Address 3813 N. Flannery Road
City Baton Rouge State LA ZIP 70814
Phone 225-273-1124

Date 12/31/2017

Payment

**Please make check payable to:
Caring to Love Ministries
3813 N. Flannery Road
Baton Rouge, LA 70814**

Office Use Only

TOTAL \$ **875.00**

TOTAL \$ 875.00

SECTION D Operating Expense-KNOWforSURE

LCP Budget to reimburse CTLM = \$875.00 for month

69



Created **Status** **Approvals** **Transaction Type** **Account** **Amount**

1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59105	LCP CHECKING xxxxx6649	\$875.00
----------	------------	--------	--------------------------------	------------------------	----------

Tracking ID: 59105

Total Amount: \$875.00

Created: 01/09/2018 9:51 AM

Total Payments: 1

Created By: DOROTHY WALLIS

Description: KNOW FOR SURE

Authorized: 01/09/2018 9:51 AM

From: LCP CHECKING xxxxx6649

Authorized By: DOROTHY WALLIS

ACH Class Code: CCD

Will process On: 1/9/2018

ACH Header: CARING TO LOVE M

Effective: 1/10/2018

RECIPIENTS:

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
KNOW FOR SURE	KNOW.FORSURE	\$875.00	xxxx6607	Checking	XXXXX0153		

Addenda: SFW-Dec 2017

APPROVAL(S):

1 DOROTHY WALLIS

SECTION D Operating Expense-KNOWforSURE

LCP Budget to reimburse CTLM = \$875.00 for month

70

O · C

O · C

PO# 2000 224936

O · C

800 · 00 +
250 · 00 +
250 · 00 +
150 · 00 +
500 · 00 +
1,950 · 00 *

SECTION F

1,950 · 00 +
2,200 · 00 +
1,125 · 00 +
700 · 00 +
700 · 00 +
250 · 00 +
4,750 · 00 +
11,675 · 00 *

PROFESSIONAL

O · C

**LIFE CHOICE PROJECT
PROVIDER REQUEST FOR PAYMENT
COST REIMBURSEMENT INVOICE**

CONTRACTOR:	<u>Caring to Love Ministries</u>	REPORT CATEGORY #	<u>5071</u>
SERVICE PROVIDED:	<u>Abortion Alternative-Statewide.</u>	P. O. #	<u>2000 224936</u>
ADDRESS	<u>3813 N. Flannery Rd.</u>	GRS ORG CODE #	<u>4274</u>
	<u>Baton Rouge, LA 70814</u>	OBJECT CODE	<u>3740</u>
CONTACT PERSON:	<u>Dorothy Wallis</u>	INVOICE #	<u>2000224936-1217</u>
TITLE:	<u>President/CEO</u>	PHONE #	<u>225-273-1124</u>
		MONTH & YEAR	<u>December 2017</u>
		PARISH SERVED:	<u>Statewide</u>

CUMM PREVIOUS 1st MONTH PARTICIPANTS	<u>955</u>
1st MONTH PARTICIPANTS SERVED THIS MONTH:	<u>149</u>
CUMMULATIVE 1st MONTHPARTICIPANTS	<u>1104</u>

SECTION A-SALARY

Services Coordinator	Sanaretha Gray	1,756.92	
Home Prenatal Care Nurse	Kim Hardee	1,600.00	
Home Prenatal Care Educator	J Monic Adams	980.00	
Clerical Support Specialist		0.00	
	TOTAL SALARIES-Direct Svcs	<u>4,336.92</u>	<u>4,336.92</u>

SECTION B - FRINGE

Insurance	Direct Services	250.00	
FICA	Direct Services	331.77	
Worker's Compensation	Direct Services	102.71	
	TOTAL FRINGES-Direct Svcs	<u>684.48</u>	<u>684.48</u>

SECTION C - TRAVEL

Travel	Direct Services	234.09	
Travel	Direct Services	17.34	
	TOTAL TRAVEL-Direct Svcs	<u>251.43</u>	<u>251.43</u>

SECTION D - OPERATING EXPENSES

Printing	Direct Services	337.95 ✓	
Printing	Direct Services	1,100.00 ✓	
Office Supplies	Direct Services	1,794.02 ✓	
Copy Machine	Direct Services	250.00 ✓	
Internet Service	Direct Services	195.00 ✓	
Media	Direct Services	0.00 ✓	
Website	Direct Services	14.95 ✓	
KNOWforSURE	Direct Services	875.00 ✓	
	TOTAL OPERATING EXPENSES FOR MONTH	<u>4,566.92</u>	<u>4,566.92</u>

Direct Mailing Services, Inc.

ACH = \$2200.00

16959 Highland Club Ave
Baton Rouge, LA 70817**Invoice**

Date	Invoice #
12/31/2017	567

Bill To
Life Choice Project CTLM 3813 N Flannery Rd Baton Rouge, LA 70814

P.O. No.	Terms	Project
	Net 5	

Quantity	Description	Rate	Amount
1	Life Choice Accounting Services-Dec 2017	2,200.00	2,200.00

Thank you for the opportunity to serve you!

Total

\$2200.00

72

PO# 2000 224936-1217

Section F-Professional-Accounting Svc

Page 2 of 3

PO # 2000 224936-1217

Section F-Professional-Accounting Svc

Page 2 of 3

ACH = \$2200.00

ACH = \$2200.00

Life Choice Project

Caring To Love Ministries

PO # 2000 224936-1217

December 2017

Detailed Description for Professional: Accounting Services

<u>Date</u>	<u>Hours</u>	<u>Description</u>	<u>Amount</u>
		Direct Mailing Services (Vickie Davis)	\$ 2,200.00
12/4/2017		8 Begin all new billing worksheets for month, review Budget vs. Actual for this month, create all new LCP Grant worksheets to track LCP expenses and services; paid LCP a/p due	
12/8/2017		10 Completed payroll and paid any Accounts Payable invoices Made copies of all invoices and cancelled checks and credit card receipts to justify expenditures, Paid payroll taxes, unemployment premium for prior month Verified receipt of all Subcontractors billing documents,	
12/11-12/12/17		15 Completed any A/P and filed documents Paid LCP invoices received Continue preparing billing for this month's invoice Entered all Subcontractors Front Pages and analyze MTS to Actuals served, Balanced prior month bank statements, Met with Director to receive approval to pay Subcontractors front pages after any cuts are made if needed, Begin ACH payments that are approved Completed any final ACH payments, compiled all paperwork needed for entire billing, printed coding on each page of billing, created invoice worksheets, created ACH supporting document, ran Gulf Coast Bank transaction detail, completed Budget vs Actual and confirmed all payments are within LCP Budget	
12/13/2017		10 Completed any A/P and filed documents Paid LCP invoices received Reviewed entire billing and met with Director for approval, copied billing in color 2 times for distribution and filing: Enter LCP billing into Quickbooks and verify balance to Budget vs Actual worksheet, gave reports to Director about MTS for next month	
12/18/2017		8 Pay LCP invoices received, searched for any invoices not received, filed any documents for LCP; issued prior month Financials Completed payroll and paid any Accounts Payable invoices; filed documents Update all LCP worksheets to track budget and services	
12/20/2017		8 Pay LCP invoices received, searched for any invoices not received and filed accounting documents. Began accounting for next months LCP billing Prepare for all ACH payments due next week Compare LCP expenditures to Budget	
12/27/2017		8 Pay A/P bills due Made copies of any LCP cancelled checks or credit card receipts to include in billing Verify all LCP bills for month are paid and cleared bank	
		67 Total Hours Worked	

ACH = \$2200.00



Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59106	LCP CHECKING xxxxx6649	\$2,200.00

Tracking ID: 59106**Total Amount:** \$2,200.00**Created:** 01/09/2018 9:52 AM**Total Payments:** 1**Created By:** DOROTHY WALLIS**From:** LCP CHECKING xxxxx6649**Authorized:** 01/09/2018 9:52 AM**ACH Class Code:** CCD**Authorized By:** DOROTHY WALLIS**ACH Header:** CARING TO LOVE M**Will process On:** 1/9/2018**Effective:** 1/10/2018**RECIPIENTS:**

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
DIRECT MAIL SERVICE	DIRECT MAIL SERVICE		\$2,200.00	XXXXX4392	Checking	XXXXX0090	

Addenda: DMS-Dec 2017

APPROVAL(S):

1 DOROTHY WALLIS

ACH = \$1125.00

Resources for Communities

Garcia Bodley
 P.O. Box 73215
 Baton Rouge, LA 70874
 Phone: (225) 328-1965

INVOICE

Invoice #: 2017-1100

For: Services:

31-Dec-17

Caring to Love Ministries
 C/O Life Choice Project
 3813 Flannery Road
 Baton Rouge, LA 70814
 (225) 273-1124

Location: Caring to Love Ministries
 C/O Life Choice Project
 3813 Flannery Road
 Baton Rouge, LA 70814

Date(s)	Description of Services Performed	# of Hours	Rate of Pay	Amount Billed
12/4, 12/9, 12/11	As consultant, reviewed and analyze service delivery electronic information on; reviewed outstanding budget (service categories) and MTS to determine strategies for accomplishing.	3		
12/6, 12/17	As consultant, conducted on-going review of weekly, monthly and cummulative statistical information on clients and services to determine trends and compare to previous information to determine patterns or discrepancies.	3		
ongoing throughout month	Maintained and revised programmatic documentations i.e., invoice forms, etc. quality assurance/compliance guides	3		
ongoing	Development and editing of E-Choice Month Newsletter	4		
12/12, 12/15	Discussed with LCP Administrator, Accountant and other LCP staff review of service delivery trends and to plan appropriately for potential problems or barriers	2		
		15	\$ 75.00	\$1,125.00

75



Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59307	LCP CHECKING xxxxx6649	\$1,125.00

Tracking ID: 59307

Total Amount: \$1,125.00

Created: 01/09/2018 12:42 PM

Total Payments: 1

Created By: DOROTHY WALLIS

From: LCP CHECKING xxxxx6649

Authorized: 01/09/2018 12:42 PM

ACH Class Code: CCD

Authorized By: DOROTHY WALLIS

ACH Header: CARING TO LOVE M

Will process On: 1/9/2018

Effective: 1/10/2018

RECIPIENTS:

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
RESOURCES COMMUN	RESOURCES FOR COMMUN		\$1,125.00	XXXXX07195	Checking	XXXXX0090	

Addenda: ResourcesForComm-Dec17

APPROVAL(S):

1 DOROTHY WALLIS

76

Randy Rice and Associates ACH = \$700.008221 Summa Ave Suite C
Baton Rouge, LA 70809-3451**Invoice**

DATE	INVOICE #
12/31/2017	13951

Louisiana Life Choice Project
 3813 North Flannery
 Baton Rouge, LA 70814

DESCRIPTION	AMOUNT
December PR	
Life Choice: LPC Public Relations 20.50 Hrs @ \$34.15 per hour	700.00
4-Gathering of ratings for Radio and/or Television for each station 12-4-16 2.5-Check ranking of each station to determine where the advertising dollars would be the most beneficial 12-4-16 3.0-Negotiation of rates for each of the Radio and/or Television Stations 12-5-16 4-Generation of Orders for each station by daypart to ensure we are getting the best and most of the budget we are provided. 12-5-16 2-Audit of all invoices from each station to ensure that all spots ran as ordered 12-18-16 1.5-Send discrepancy notices for all spots not ran correctly 12-18-16 1-Issuance of credit in the event spots ran incorrectly 12-18-16 1-Arrange for Deliverables 12-18-16 1.5-Processing and delivery of Deliverables 12-18-16	
	Received JAN 12 2018 DCFS Economic Stability
Warm Christmas Wishes from all of us, to all of you!	Total
	\$700.00

ACH = \$700.00



Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59103	LCP CHECKING xxxxx6649	\$700.00

Tracking ID: 59103**Total Amount:** \$700.00**Created:** 01/09/2018 9:50 AM**Total Payments:** 1**Created By:** DOROTHY WALLIS**From:** LCP CHECKING xxxxx6649**Authorized:** 01/09/2018 9:50 AM**ACH Class Code:** CCD**Authorized By:** DOROTHY WALLIS**ACH Header:** CARING TO LOVE M**Will process On:** 1/9/2018**Effective:** 1/10/2018**RECIPIENTS:**

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
RANDY RICE AND ASSOC	RANDY RICE AND ASSOC		\$700.00	XXXXX7939	Checking	XXXXX0137	

Addenda:

Rice & Assoc-P/R

APPROVAL(S):

1 DOROTHY WALLIS

78

ACH = \$700.00**Invoice****Kathleen Benfield Consultants**

P.O. Box 10305
 New Orleans, LA 70181

Invoice #: 201172
Invoice Date: 12/31/2017

Terms

Net 30

Bill To:

Life Choice Project
 Dorothy Wallis
 3813 N. Flannery Rd.
 Baton Rouge, LA 70814

Description	Rate	Hours/Qty	Amount
Services for December, 2017 including training, modifications to web based database and reporting	700.00	1	700.00
Website/Database Maintenance and Support 12/05/17		0.5	0.00
Website/Database Maintenance and Support 12/06/17		3	0.00
Website/Database Maintenance and Support 12/07/17		1	0.00
Website/Database Maintenance and Support 12/26/17		3	0.00
Website/Database Maintenance and Support 12/28/17		2	0.00

Total**\$700.00**

Phone #	E-Mail
504-737-9030	kathleen@kathleenbenfield.com

Balance Due**\$700.00**

ACH = \$700.00

Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59107	LCP CHECKING xxxxx6649	\$700.00

Tracking ID: 59107**Total Amount: \$700.00****Created: 01/09/2018 9:54 AM****Total Payments: 1****Created By: DOROTHY WALLIS****From: LCP CHECKING xxxxx6649****Authorized: 01/09/2018 9:54 AM****ACH Class Code: CCD****Authorized By: DOROTHY WALLIS****ACH Header: CARING TO LOVE M****Will process On: 1/9/2018****Effective: 1/10/2018****RECIPIENTS:**

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
K BENFIELD ASSOC	K.BENFIELD.ASSOC		\$700.00	XXXXX8948	Checking	XXXXX0171	

Addenda: K Benfield Dec 2017

APPROVAL(S):

1 DOROTHY WALLIS

80

Turn Key Solutions, LLC
11911 Justice Avenue
Baton Rouge, LA 70816
(225) 751-4444



PAID

Bill To:
Caring To Love Ministries Attn: Dorothy Wallis 3813 N. Flannery Road Baton Rouge, LA 70814-8002 United States

Date	Invoice
12/01/2017	10029268

Terms	Due Date	PO Number	Reference
Net 30 days	12/31/2017		Monthly Billing for December

PLAN TYPE DESIGNATION: "PRIME FIXED FEE"

SEATS INCLUDED: 7

HELPDESK INCLUDED FOR: ALL OFFICE STAFF

PRIMARY components of your selected support plan:

- * The full TKS Partner Pulse Process
- * Virtual CIO Meetings regularly throughout the year to review strategy, I.T. risks, how your I.T. can support your business plans, our service, and anything else you'd like to talk about.
- * Network Security & Risk Assessment Scheduled regularly throughout the year
- * TKS' Gold Standard Implementation at no extra cost
- * Our best security solutions, including multiple antivirus, antimalware, and zero-day threat protection systems
- * Offsite monitoring and log review of your firewall
- * 24 x 7 monitoring of your system

STRATEGY, VCIO, AND STANDARDS:

- * vCIO In-Person Meeting Schedule: _____, and unlimited remote consultation on request for your strategy or other IT questions
- * Onsite Wellness Checkups Schedule: _____, and constant remote monitoring
- * Full suite of reports delivered daily, weekly, and monthly to keep you informed

DISASTER RECOVERY:

- * Onsite Disaster Recovery = Full capability, same day restoration of your server on our hardware if your server dies, typically
- * Offsite Backup Plan = "TKS GUSTAV" (96 hr DR Time Objective)
- * Remote support to restore service is included and not billable
- * Onsite support to facilitate with disaster recovery is billed separately, at 75% of regular rates (25% discount).

REMOTE HELP DESK:

- * We provide Remote Support (Help Desk) as needed for ALL YOUR STAFF members, for any technical issues related to your corporate IT.
- * Unlimited remote Server Administration, User Account Management
- * We provide the first level of support to your staff. Some support issues we'll need to involve other people on in order to resolve the issue, but we'll "own" the issue and stay involved until it's resolved.
- * Regular personal check-in with every staff member (via phone or email) to make sure things are working optimally for them.

ONSITE SERVICES:

- * Regularly scheduled vCIO and Wellness Checkups are included and not billed separately.
- * Onsite support and other services are billed separately, at 75% of regular rates (25% discount).

PROJECTS (MOVES/ADDS/CHANGES):

- * PC & Laptops purchased from TKS installed according to your documented install guidelines, for flat amount/ device, at our schedule availability.
- * 1 new workstation installed per "Wellness Checkup" period at no additional cost, if purchased from TKS.
- * All other project work is billed separately, at 75% of regular rates (25% discount).

CLOUD & MOBILITY SERVICES:

- * Not included, available separately

Please make checks payable to Turn Key Solutions, LLC
 Mail to: 11911 Justice Ave, Baton Rouge, LA 70816
 or use <https://www.billandpay.com/go/tks>

Invoice Subtotal:	1,101.04
Sales Tax:	109.82
Invoice Total:	1,210.86

Section F Professional Information Technology Cons.-TurnKey

LGP Budget to reimburse CTL M = \$250.00

<p>Payment Receipt TurnKey Solutions, LLC 11911 Justice Ave Baton Rouge, LA 70816 225-751-4444 ar@turnkeysol.com</p> <hr/> <p>Date: 12/18/2017</p> <p>Confirmation Code: 1528530-6714-1784475239</p> <p>Customer: Caring To Love Ministries</p> <p>Amount: \$1,210.86</p> <p>Name On Account: Dorothy H. Wallace</p> <p>Account: Credit Card *****0848</p> <hr/> <p>Item Date Created Due Date Amount Paid</p> <tr><td></td><td></td><td></td><td>\$1,210.86</td></tr>				\$1,210.86
			\$1,210.86	

Section F Professional-Information Technology Cons.-Turnkey

LCP Budget to reimburse CTLM = \$250.00

82

PO# 2000 224936-1217

Section F-Other Charges-Audit

MICHAEL R. CHOATE, CPA APC

2915 S. Sherwood Forest Blvd., Suite B
Baton Rouge, LA 70816Page 1 of 1
Invoice

Date	Invoice #
12/29/2017	44422

Bill To
Caring to Love Ministries, Inc. Dorothy Wallis 3813 N. Flannery Road Baton Rouge, LA 70814

Description	Amount
FOR PROFESSIONAL SERVICES RENDERED:	0.00
FINAL BILLING ON AUDIT EXAMINATION OF FINANCIAL STATEMENTS FOR THE YEAR ENDED JUNE 30, 2017	4,750.00
Section F Professional-Auditor Services-Michael Choate, CPA	
LCP Budget to reimburse CTLM = \$4750.00	
DUE UPON RECEIPT	Total \$4,750.00

MICHAEL R. CHOATE, CPA APC

2915 S. Sherwood Forest Blvd., Suite B
Baton Rouge, LA 70816**Invoice**

Date	Invoice #
12/29/2017	44422

Bill To
Caring to Love Ministries, Inc. Dorothy Wallis 3813 N. Flannery Road Baton Rouge, LA 70814

Description	Amount
FOR PROFESSIONAL SERVICES RENDERED:	0.00
FINAL BILLING ON AUDIT EXAMINATION OF FINANCIAL STATEMENTS FOR THE YEAR ENDED JUNE 30, 2017	4,750.00

Paid 1/11/2018

Approval confirmation

046306

Section F-Professional Audit Services-Michael Choate, CPA

LCP Budget to reimburse CTLM = \$4750.00

DUE UPON RECEIPT	Total	\$4,750.00
------------------	-------	------------

HIGHWAY 8 HOTEL LTD
2915 S HIGHWAY 8001 BL.
SANTA FE SPRINGS, CA 70016

Merchant ID: 6430
Term ID: 00001 Store #: 6430
Ref #: 0001

Sale

XXXXXX00000000000000000000000000

VISA

Entry Method: Manual

Total: \$ 4,750.00

01/11/18 17:26:21
Inv #: 000001 Apro Code: 000006
Transaction ID: 500011843012325
Aproved: Online Batch#: 000001

Customer Copy

Recd 1/20/18
J

CHASE BANK - CHECKING Account Activity

Secure | https://cards.chase.com/cx/AccountActivity?AI=594125369#

Payments & Transfers | Customer Center

CHASE ONLINE Tuesday, January 25, 2016

My Accounts > Account Details > Account Activity

Account Activity

© Print | Help with this page

CHASE D. WALLIS (- 0846) [View Details](#)

 [Download Receipts & Tape](#)

Temporary Authorization

Trans Date	Type	Description	Amount
01/24/2016	Pending	ADOC - STOCK	\$0.40

Posted Activity [Print](#) [Download](#)

Since last statement [Search Transactions](#)

Trans Date	Post Date	Type	Description	Business Category	Amount
01/22/2016	01/29/2016	Sale	Dropbox 2PV36U3PCW4	Utilities	\$69.00
01/22/2016	01/29/2016	Sale	MAILCHIMP MONTHLY	Miscellaneous	\$41.00
01/06/2016	01/21/2016	Sale	SWIFTWFOOD.COM CHARGE	Miscellaneous	\$14.85
01/19/2016	01/21/2016	Sale	OFFICE DEPOT #1127	Miscellaneous	\$57.45
01/19/2016	01/19/2016	Sale	TURKEY SOLUTION LLC	Work Related	\$121.05
01/19/2016	01/19/2016	Sale	OUTBACK 1601	Dining Out	\$30.00
01/19/2016	01/17/2016	Sale	HILTON GARDEN INN	Travel	\$375.87
01/13/2016	01/13/2016	Sale	RACETRAC 2405 00024070	Auto Related	\$44.00
01/13/2016	01/13/2016	Sale	RACETRAC 2405 00024070	Auto Related	\$3.84
01/13/2016	01/14/2016	Sale	ARRENA LLC	Work Related	\$4800.00
01/13/2016	01/14/2016	Sale	OFFICE DEPOT #2742	Work Related	\$254.85
01/11/2016	01/12/2016	Sale	MICHAEL R. CHAITE CPA PA Legal & Professional	Legal & Professional	\$4750.00
01/10/2016	01/10/2016	Sale	ATT/BILL PAYMENT	Utilities	\$12.50

\$12,118.71



CHASE ON

Print I'd Like To...

My Accounts > Account Details > Account Activity

CHASE

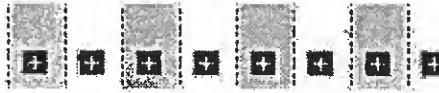
Account Activity

Temporary Authorizations			
Trans Date	Type	Description	
01/24/2018	Pending	ADOBE *STOCK	 Download

 ▶ Download Receipts & Tags

Posted Activity			
Trans Date	Post Date	Type	Description
<input type="checkbox"/> Since Last Statement ▾			

 Search  Barcode Category



Med 1/29/18 J

ACH \$800+\$250+\$250+\$150+\$500=\$1950.00

J HAM ENTERPRISES, INC.

INVOICE

Date: December 31, 2017

Attention: Dorothy Wallis

Bill to:

Caring to Love Ministries
3813 North Flannery Rd.
Baton Rouge, LA 70814

Remit to:

J Ham Enterprises, Inc.
812 Sandy Lane
Ruston, LA 71270

Description

Pregnancy Help Center Consulting
December 2017
27 hours @ \$30.00 per hour

Amount Due:

\$800.00

Summary description of activities by category:

Hours	Activity
8	Daily compilation and submission of center client visits
12	Compliance Visits for Women's Resource Center in Natchitoches and A Pregnancy Center & Clinic in Lafayette -Audit of client files, Review of Standards of Care, Review of Clinic Policies & Procedures, Review of Instructional Resources, Discussion of Findings with Director
2	Preparation, Completion, & Submission of Compliance Documents
1	Phone conferences with LCP Director
2	Communication with Directors concerning reporting requirements and daily standings
2	Administrative Record Keeping

1/9/2018

PO# 2000 224936-1217 Section F-Professional-Prof Tech Svc.

Gulf Coast Bank and Trust

Page 2 of 10

ACH \$800+\$250+\$250+\$150+\$500=\$1950.00



Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59111	LCP CHECKING xxxxx6649	\$800.00

Tracking ID: 59111**Total Amount:** \$800.00**Created:** 01/09/2018 10:00 AM**Total Payments:** 1**Created By:** DOROTHY WALLIS**Description:** J HAM & Associates**Authorized:** 01/09/2018 10:01 AM**From:** LCP CHECKING xxxxx6649**Authorized By:** DOROTHY WALLIS**ACH Class Code:** PPD**Will process On:** 1/9/2018**ACH Header:** CARING TO LOVE M**Effective:** 1/10/2018**RECIPIENTS:**

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
J HAM	J HAM		\$800.00	XXXX0613	Checking	XXXXX2758	

Addenda: J Ham=Dec 2017

APPROVAL(S):

1 DOROTHY WALLIS

86

ACH \$800+\$250+\$250+\$150+\$500=\$1950.00

INVOICE**Date:** December 31, 2017**Attention:** Dorothy Wallis**Bill to:**

Caring to Love Ministries
3813 North Flannery Rd.
Baton Rouge, LA 70814

Remit to:

Sanaretha Gray
P. O. Box 413
Prairieville, LA 70769

Description

Pregnancy Help Center Consulting
December 2017
25 hours @ \$10.00 per hour

Amount due:

\$250.00

Summary description of activities by category:

Hours	Activity
1.0	Compliance review CPC - Gonzales - Audit of client files, review of Standards of Care, Review of Clinic Policies & Procedures, Review of Instructional Resources, Discussion of findings with Director
4.0	Preparation, completion, & submission of Compliance Documents
20.0	Review and verification of Clinic billing packets, compilation of error report

ACH \$800+\$250+\$250+\$150+\$500=\$1950.00



Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59115	LCP CHECKING xxxxx6649	\$250.00

Tracking ID: 59115**Total Amount:** \$250.00**Created:** 01/09/2018 10:03 AM**Total Payments:** 1**Created By:** DOROTHY WALLIS**Description:** Sanaretha Gray**Authorized:** 01/09/2018 10:03 AM**From:** LCP CHECKING xxxxx6649**Authorized By:** DOROTHY WALLIS**ACH Class Code:** PPD**Will process On:** 1/9/2018**ACH Header:** CARING TO LOVE M**Effective:** 1/10/2018**RECIPIENTS:**

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
Sanaretha Gray	Sanaretha Gray		\$250.00	000000012	Checking	XXXXX3511	

Addenda: S Gray-Dec 2017

APPROVAL(S):

1 DOROTHY WALLIS

~~ACH \$800+\$250+\$250+\$150+\$500=\$1950.00~~**INVOICE****Date:** December 29, 2017**Attention:** Dorothy Wallis**Bill to:**

Caring to Love Ministries
3813 North Flannery Rd.
Baton Rouge, LA 70814

Remit to:

Michelle Dyess
12238 Leblanc Ln
Walker, LA 70785

Description

Pregnancy Help Center Consulting
December 2017
10 hours @ \$25 per hour

Amount due:~~\$250.00~~**Summary description of activities by category:**

Hours	Activity
8	Compliance visit to Care Pregnancy Clinic in Baton Rouge, Restoration PRC, and Women's Life Ministries <ul style="list-style-type: none">- Audit of client files, review of Standards of Care, Review of Clinic Policies & Procedures, Review of Instructional Resources, Discussion of findings with Director
2	Preparation, completion, & Submission of Compliance Documents

1/9/2018

PO# 2000 224936-1217 Section F-Professional-Prof Tech Svc.

Gulf Coast Bank and Trust

Page 6 of 10

ACH \$800+\$250+\$250+\$150+\$500=\$1950.00



Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59121	LCP CHECKING xxxxx6649	\$250.00

Tracking ID: 59121**Total Amount:** \$250.00**Created:** 01/09/2018 10:05 AM**Total Payments:** 1**Created By:** DOROTHY WALLIS**Description:** Michelle Dyess**Authorized:** 01/09/2018 10:06 AM**From:** LCP CHECKING xxxxx6649**Authorized By:** DOROTHY WALLIS**ACH Class Code:** PPD**Will process On:** 1/9/2018**ACH Header:** CARING TO LOVE M**Effective:** 1/10/2018**RECIPIENTS:**

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
Michelle Dyess	Michelle Dyess	MDyess	\$250.00	XXXX2093	Checking	X000X0153	

Addenda: M Dyess-Dec 2017

APPROVAL(S):

1 DOROTHY WALLIS

ACH \$800+\$250+\$250-\$150-\$500=\$1950.00

INVOICE**Date:** December 31, 2017**Attention:** Dorothy Wallis**Bill to:**

Caring to Love Ministries
3813 North Flannery Rd.
Baton Rouge, LA 70814

Remit to:

Emily Ilgenfritz
10012 Rocky Knoll Circle
Shreveport, LA 71106

Description

Pregnancy Help Center Consulting
December 2017
10 hours @ \$15.00 per hour

Amount due:

\$150.00

Summary description of activities by category:

Hours	Activity
10	Review and verification of Clinic billing packets, compilation of error report

1/9/2018

PO# 2000 224936-1217 Section F-Professional-Prof Tech Svc.

Gulf Coast Bank and Trust

Page 8 of 10

ACH \$800+\$250+\$250+\$150+\$500=\$1950.00



Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59123	LCP CHECKING xxxxxx6649	\$150.00

Tracking ID: 59123**Total Amount:** \$150.00**Created:** 01/09/2018 10:07 AM**Total Payments:** 1**Created By:** DOROTHY WALLIS**Description:** Emily Ilgenfritz**Authorized:** 01/09/2018 10:07 AM**From:** LCP CHECKING xxxxxx6649**Authorized By:** DOROTHY WALLIS**ACH Class Code:** PPD**Will process On:** 1/9/2018**ACH Header:** CARING TO LOVE M**Effective:** 1/10/2018**RECIPIENTS:**

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
Emily Ilgenfritz	Emily Ilgenfritz		\$150.00	XXXX285	Checking	XXXXX3650	

Addenda: E Ilgenfritz-Dec 2017

APPROVAL(S):

1 DOROTHY WALLIS

ACH \$800+\$250+\$250+\$150+\$500=\$1950.00

INVOICE**Date:** December 30, 2017**Attention:** Dorothy Wallis**Bill to:**

Caring to Love Ministries
3813 North Flannery Rd.
Baton Rouge, LA 70814

Remit To:

Alexis Farrugia
416 Shrewsbury Ct.
Jefferson, LA 70121

Description:

Pregnancy Help Center Consulting
December 2017
20 hours @ \$25.00 per hour

Amount Due:

\$500.00

Summary description of activities by category:

Hours	Activity
2	Compliance visits to ACCESS Pregnancy Center - Audit of client visits, review of Standards of Care, Review of Clinic Policies & Procedures, Review of Instructional Resources, Discussion of findings with Director
2	Preparation, completion, & submission of Compliance Documents
16	Review and verification of Clinic billing packets, compilation of error report


**GULF COAST BANK
& Trust Company**
ACH \$800+\$250+\$250+\$150+\$500=\$1950.00

Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59127	LCP CHECKING xxxxxx6649	\$500.00

Tracking ID: 59127**Total Amount: \$500.00****Created: 01/09/2018 10:09 AM****Total Payments: 1****Created By: DOROTHY WALLIS****Description: Alexis Farrugia****Authorized: 01/09/2018 10:09 AM****From: LCP CHECKING xxxxxx6649****Authorized By: DOROTHY WALLIS****ACH Class Code: PPD****Will process On: 1/9/2018****ACH Header: CARING TO LOVE M****Effective: 1/10/2018****RECIPIENTS:**

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
Alexis Farrugia	Alexis Farrulja		\$500.00	XXXXX71153	Checking	XXXXX0090	

Addenda: A Farrugia-Dec2017**APPROVAL(S):**

1 DOROTHY WALLIS

PO# 2000 224936

SECTION G

OTHER CHARGES

SECTION G Coordinated Prenatal Care Services

P.O. # 2000 224936

Dec 2017 BILLED **

TOTAL ALL SUB REPORTS

Cumm from Last Month	955 Cumm 2nd Visits Last Month	790	
Number of New Participants	149 New 2nd Visits	228	
Cummulative Participants	1104 Cumm 2nd Visits	1018	
Client Services			
	UNIT COST	# Clients	TOTALS
1 Intake Application Process	\$ 10.00	149	\$ 1,490.00
2 Positive Pregnancy Test	\$ 10.00	170	\$ 1,700.00
3 Negative Pregnancy Test	\$ 10.00	34	\$ 340.00
4 Abstinence Education	\$ 30.00	34	\$ 1,020.00
5 Counseling	\$ 40.00	191	\$ 7,640.00
6 Referral Services	\$ 10.00	215	\$ 2,150.00
7 Health Risk Assessment	\$ 30.00	228	\$ 6,840.00
8 Care Plan Development	\$ 30.00	115	\$ 3,450.00
9 On-going Care	\$ 30.00	126	\$ 3,780.00
10 Family Support Services	\$ 40.00	80	\$ 3,200.00
11 Home Outreach Support Services	\$ 75.00	51	\$ 3,825.00
12 Birth Outcome Confirmation	\$ 40.00	38	\$ 1,520.00
TOTAL SUB-CONTRACTOR REIMBURSEMENT		1,431	\$ 36,965.00

Amount Due \$ **36,965.00****Summary:**

Care Pregnancy Clinic	\$ 14,965.00
Women's Resource Center of Natch LA	\$ 4,930.00
A Pregnancy Center	\$ 8,390.00
Access Pregnancy-(Catholic Charities)	\$ 2,140.00
Women's Life Ministries	\$ 1,970.00
Restoration House	\$ 3,640.00
CPC-Gonzales	\$ 920.00

TOTAL ALL CENTERS\$ **36,965.00**

Section G. OTHER CHARGES

Referral Reimbursement Report

Request for Reimbursement Form
LOUISIANA LIFE CHOICES PROJECT
OFFICIAL LIFE CHOICES PROJECT MONTHLY REPORTING FORM

Direct questions to Dorothy Wallis, Project Director, Phone 225-273-1124

Name of Organization Care Pregnancy Clinic
 Project Number LCP17-18-01
 Date of Report 01/01/2017 thru 01/31/2017 (Report Printed: 01/08/2018)
 Report Submitted By Deborah Clayton
 Address 3813 N. Flannery Rd.
 City State Zip Baton Rouge, LA 70814

IN KIND

Items / Equipment	Appr Value	Source Or Donor	Client		
			Not Appr	Coun Mins	Center Date ID

REIMBURSEMENT

New Pos. Clients:70 2nd:48 3rd:23 Pantry:86 Home:25 Postpartum:14

Description of Service	#Served	Reimb. Cost	Total
Intake Application	64	\$10	\$ 640
Positive Pregnancy Test	70	\$10	\$ 700
Negative Pregnancy Test	17	\$10	\$ 170
Abstinence Education	17	\$30	\$ 510
Counseling	70	\$40	\$ 2800
Referral Services	96	\$10	\$ 960
Health Risk Assessment	95	\$30	\$ 2850
Care Plan Development	47	\$30	\$ 1410
On-Going Care/Monitoring	47	\$30	\$ 1410
Family Support Services	27	\$40	\$ 1080
Home Outreach Support Services	25	\$75	\$ 1875
Birth Outcome Confirmation	14	\$40	\$ 560

Total Services 589

\$ 14965

2nd Positive and/or Negative Test Authorization

Adjustments:

Total Billed

I certify that no funds were used for religious purposes or materials and that none of the services provided above are already funded by another state or federal funding source.

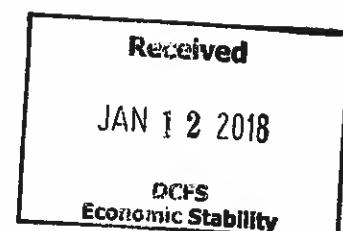
Director's Signature

(Signature)

Supervisor's Signature

Data Entry Clerk's Signature

*** FOR OFFICIAL USE ONLY ***



SECTION G Coordinated Prenatal Care Services

P.O.# 2000 224936

Care Pregnancy ClinicLCP 17-18-01

Cumm from Last Month	350	Cumm 2nd Visits Last Month	280
Number of New Participants for This Month	64	New 2nd Visits	95
Cummulative Participants	414	Cumm 2nd Visits	375
<u>Client Services:</u>			
	UNIT COST	# Clients	TOTALS
1 Intake Application Process	\$ 10.00	64	\$ 640.00
2 Positive Pregnancy Test	\$ 10.00	70	\$ 700.00
3 Negative Pregnancy Test	\$ 10.00	17	\$ 170.00
4 Abstinence Education	\$ 30.00	17	\$ 510.00
5 Counseling	\$ 40.00	70	\$ 2,800.00
6 Referral Services	\$ 10.00	96	\$ 960.00
7 Health Risk Assessment	\$ 30.00	95	\$ 2,850.00
8 Care Plan Care	\$ 30.00	47	\$ 1,410.00
9 On-going Care	\$ 30.00	47	\$ 1,410.00
10 Family Support Services	\$ 40.00	27	\$ 1,080.00
11 Home Outreach Support Services	\$ 75.00	25	\$ 1,875.00
12 Birth Outcome Confirmation	\$ 40.00	14	\$ 560.00
TOTAL SUB-CONTRACTOR REIMBURSEMENT		589	\$ 14,965.00

Amount Due \$ 14,965.00



Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59214	LCP CHECKING xxxxx6649	\$14,965.00

Tracking ID: 59214

Total Amount: \$14,965.00

Created: 01/09/2018 11:12 AM

Total Payments: 1

Created By: DOROTHY WALLIS

From: LCP CHECKING xxxxx6649

Authorized: 01/09/2018 11:12 AM

ACH Class Code: CCD

Authorized By: DOROTHY WALLIS

ACH Header: CARING TO LOVE M

Will process On: 1/9/2018

Effective: 1/10/2018

RECIPIENTS:

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
CARE PREGNANCY CLINIC	CARE PREGNANCY CLINIC		\$14,965.00	XXXX6569	Checking	XXXX0153	

Addenda: Care Preg Ctr-Dec17

APPROVAL(S):

1 DOROTHY WALLIS

**Request for Reimbursement Form
LOUISIANA LIFE CHOICES PROJECT
OFFICIAL LIFE CHOICES PROJECT MONTHLY REPORTING FORM**

Direct questions to Dorothy Wallis, Project Director, Phone 225-273-1124

Name of Organization Women's Resource Center of Natch La
 Project Number LCP17-18-04
 Date of Report ~~01/01/2017 - 02/28/2017~~ (Report Printed: 01/02/2018)
 Report Submitted By Danette Westfall
 Address 107 North Street
 City State Zip Natchitoches, LA 71457

IN KIND

Items / Equipment	Appr Value	Source Or Donor	Client		
			Not Appr	Coun Mins	Center Date ID

REIMBURSEMENT

New Pos. Clients:23 2nd:12 3rd:11 Pantry:29 Home:10 Postpartum:4

Description of Service	#Served	Reimb. Cost	Total
Intake Application	12	\$10	\$ 120
Positive Pregnancy Test	23	\$10	\$ 230
Negative Pregnancy Test	0	\$10	\$ 0
Abstinence Education	0	\$30	\$ 0
Counseling	23	\$40	\$ 920
Referral Services	33	\$10	\$ 330
Health Risk Assessment	33	\$30	\$ 990
Care Plan Development	12	\$30	\$ 360
On-Going Care/Monitoring	21	\$30	\$ 630
Family Support Services	11	\$40	\$ 440
Home Outreach Support Services	10	\$75	\$ 750
Birth Outcome Confirmation	4	\$40	\$ 160

Total Services 182 \$ ~~377930.00~~

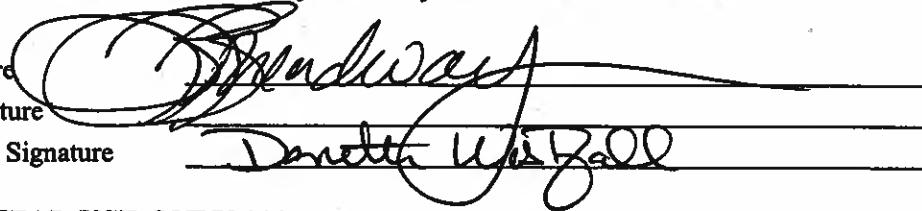
2nd Positive and/or Negative Test Authorization

Adjustments:

Total Billed

I certify that no funds were used for religious purposes or materials and that none of the services provided above are already funded by another state or federal funding source.

Director's Signature



Supervisor's Signature

Data Entry Clerk's Signature

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100

SECTION G Coordinated Prenatal Care Services

P.O.# 2000 224936

Women's Resource Center of Natch LA LCP-17-18-04

Cumm from Last Month	143 Cumm 2nd Visits Last Month	132
Number of New Participants for This Month	12 New 2nd Visits	33
Cummulative Participants	155 Cumm 2nd Visits	<u>165</u>

Client Services:

	<u>UNIT COST</u>	<u># Clients</u>	<u>TOTALS</u>
1 Intake Application Process	\$ 10.00	12	\$ 120.00
2 Positive Pregnancy Test	\$ 10.00	23	\$ 230.00
3 Negative Pregnancy Test	\$ 10.00	-	\$ -
4 Abstinence Education	\$ 30.00	-	\$ -
5 Counseling	\$ 40.00	23	\$ 920.00
6 Referral Services	\$ 10.00	33	\$ 330.00
7 Health Risk Assessment	\$ 30.00	33	\$ 990.00
8 Care Plan Care	\$ 30.00	12	\$ 360.00
9 On-going Care	\$ 30.00	21	\$ 630.00
10 Family Support Services	\$ 40.00	11	\$ 440.00
11 Home Outreach Support Services	\$ 75.00	10	\$ 750.00
12 Birth Outcome Confirmation	\$ 40.00	4	\$ 160.00
TOTAL SUB-CONTRACTOR REIMBURSEMENT		182	\$ 4,930.00

Amount Due \$ **4,930.00**



Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59222	LCP CHECKING xxxxx6649	\$4,930.00

Tracking ID: 59222**Total Amount:** \$4,930.00**Created:** 01/09/2018 11:13 AM**Total Payments:** 1**Created By:** DOROTHY WALLIS**From:** LCP CHECKING xxxxx6649**Authorized:** 01/09/2018 11:14 AM**ACH Class Code:** CCD**Authorized By:** DOROTHY WALLIS**ACH Header:** CARING TO LOVE M**Will process On:** 1/9/2018**Effective:** 1/10/2018**RECIPIENTS:**

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
WOMENS RES CENT NATCH	WOMENS RES CENT NATCH		\$4,930.00	XXXX078	Checking	XXXX2949	

Addenda: WRC Natch-Dec17**APPROVAL(S):**

1 DOROTHY WALLIS

Request for Reimbursement Form
LOUISIANA LIFE CHOICES PROJECT
 OFFICIAL LIFE CHOICES PROJECT MONTHLY REPORTING FORM

Direct questions to Dorothy Wallis, Project Director, Phone 225-273-1124

Name of Organization A Pregnancy Center & Clinic
 Project Number LCP17-18-103
 Date of Report 12/01/2017 thru 12/31/2017 (Report Printed: 01/02/2018)
 Report Submitted By Denise Williamson
 Address 913 S. College Rd Ste 206
 City State Zip Lafayette, LA 70503

IN KIND

Items / Equipment	Appr Value	Source Or Donor	Client		
			Not Appr	Coun Mins	Date
					Center ID

REIMBURSEMENT

New Pos. Clients:47 2nd:25 3rd:22 Pantry:55 Home:8 Postpartum:8

Description of Service	#Served	Reimb. Cost	Total
Intake Application	31	\$10	\$ 310
Positive Pregnancy Test	47	\$10	\$ 470
Negative Pregnancy Test	6	\$10	\$ 60
Abstinence Education	6	\$30	\$ 180
Counseling	47	\$40	\$ 1880
Referral Services	55	\$10	\$ 550
Health Risk Assessment	55	\$30	\$ 1650
Care Plan Development	25	\$30	\$ 750
On-Going Care/Monitoring	30	\$30	\$ 900
Family Support Services	18	\$40	\$ 720
Home Outreach Support Services	8	\$75	\$ 600
Birth Outcome Confirmation	8	\$40	\$ 320

Total Services 336 \$ 8390

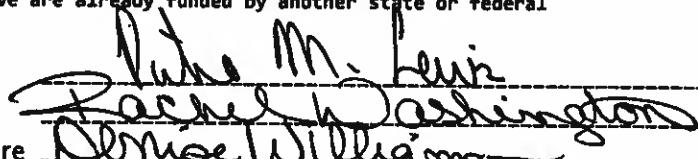
2nd Positive and/or Negative Test Authorization

Adjustments:

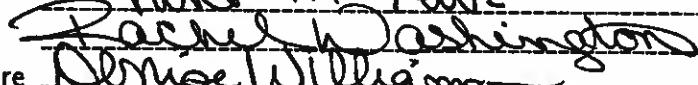
Total Billed

I certify that no funds were used for religious purposes or materials and that none of the services provided above are already funded by another state or federal funding source.

Director's Signature



Supervisor's Signature



Data Entry Clerk's Signature



*** FOR OFFICIAL USE ONLY ***

SECTION G Coordinated Prenatal Care Services

P.O.# 2000 224936

A Pregnancy CenterLCP-17-18-103

Cumm from Last Month	200	Cumm 2nd Visits Last Month	177
Number of New Participants for This Month	31	New 2nd Visits	55
Cummulative Participants	231	Cumm 2nd Visits	232

<u>Client Services:</u>	<u>UNIT COST</u>	<u># Clients</u>	<u>TOTALS</u>
1 Intake Application Process	\$ 10.00	31	\$ 310.00
2 Positive Pregnancy Test	\$ 10.00	47	\$ 470.00
3 Negative Pregnancy Test	\$ 10.00	6	\$ 60.00
4 Abstinence Education	\$ 30.00	6	\$ 180.00
5 Counseling	\$ 40.00	47	\$ 1,880.00
6 Referral Services	\$ 10.00	55	\$ 550.00
7 Health Risk Assessment	\$ 30.00	55	\$ 1,650.00
8 Care Plan Care	\$ 30.00	25	\$ 750.00
9 On-going Care	\$ 30.00	30	\$ 900.00
10 Family Support Services	\$ 40.00	18	\$ 720.00
11 Home Outreach Support Services	\$ 75.00	8	\$ 600.00
12 Birth Outcome Confirmation	\$ 40.00	8	\$ 320.00
TOTAL SUB-CONTRACTOR REIMBURSEMENT		336	\$ 8,390.00

Amount Due \$ 8,390.00

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Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59224	LCP CHECKING xxxxx6649	\$8,390.00

Tracking ID: 59224**Total Amount:** \$8,390.00**Created:** 01/09/2018 11:14 AM**Total Payments:** 1**Created By:** DOROTHY WALLIS**From:** LCP CHECKING xxxxx6649**Authorized:** 01/09/2018 11:15 AM**ACH Class Code:** CCD**Authorized By:** DOROTHY WALLIS**ACH Header:** CARING TO LOVE M**Will process On:** 1/9/2018**Effective:** 1/10/2018**RECIPIENTS:**

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
A PREGNANCY CENTER C	A PREGNANCY CENTER.C		\$8,390.00	XXXX2775	Checking	XXXX0222	

Addenda: A Preg Ctr-Dec17**APPROVAL(S):**

1 DOROTHY WALLIS

Request for Reimbursement Form
LOUISIANA LIFE CHOICES PROJECT
OFFICIAL LIFE CHOICES PROJECT MONTHLY REPORTING FORM

Direct questions to Dorothy Wallis, Project Director, Phone 225-273-1124

Name of Organization Access - Catholic Charities
 Project Number LCP17-18-107-1
 Date of Report 01/06/2018 (Report Printed: 01/06/2018)
 Report Submitted By Kay Bongard
 Address 921 Aris Avenue
 City State Zip Metairie, LA 70005

IN KIND

Items / Equipment	Appr Value	Source Or Donor	Client		
			Not Appr	Coun Mins	Date

REIMBURSEMENT

New Pos. Clients:10 2nd:11 3rd:5 Pantry:37 Home:0 Postpartum:0

Description of Service	#Served	Reimb. Cost	Total
Intake Application	12	\$10	\$ 120
Positive Pregnancy Test	10	\$10	\$ 100
Negative Pregnancy Test	1	\$10	\$ 10
Abstinence Education	1	\$30	\$ 30
Counseling	16	\$40	\$ 640
Referral Services	12	\$10	\$ 120
Health Risk Assessment	16	\$30	\$ 480
Care Plan Development	11	\$30	\$ 330
On-Going Care/Monitoring	5	\$30	\$ 150
Family Support Services	4	\$40	\$ 160
Home Outreach Support Services	0	\$75	\$ 0
Birth Outcome Confirmation	0	\$40	\$ 0

Total Services 88

Signature 2140

2nd Positive and/or Negative Test Authorization

Adjustments:	<input type="checkbox"/>	<input type="checkbox"/>
Total Billed	<input type="checkbox"/>	<input type="checkbox"/>

I certify that no funds were used for religious purposes or materials and that none of the services provided above are already funded by another state or federal funding source.

Director's Signature

Supervisor's Signature

Data Entry Clerk's Signature

Dorothy Wallis

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SECTION G Coordinated Prenatal Care Services

P.O.# 2000 224936

Access Pregnancy-(Catholic Charities) LCP-17-18-107-1

Cumm from Last Month	58	Cumm 2nd Visits Last Month	49
Number of New Participants for This Month	12	New 2nd Visits	16
Cummulative Participants	70	Cumm 2nd Visits	65
<u>Client Services:</u>			
	UNIT COST	# Clients	TOTALS
1 Intake Application Process	\$ 10.00	12	\$ 120.00
2 Positive Pregnancy Test	\$ 10.00	10	\$ 100.00
3 Negative Pregnancy Test	\$ 10.00	1	\$ 10.00
4 Abstinence Education	\$ 30.00	1	\$ 30.00
5 Counseling	\$ 40.00	16	\$ 640.00
6 Referral Services	\$ 10.00	12	\$ 120.00
7 Health Risk Assessment	\$ 30.00	16	\$ 480.00
8 Care Plan Care	\$ 30.00	11	\$ 330.00
9 On-going Care	\$ 30.00	5	\$ 150.00
10 Family Support Services	\$ 40.00	4	\$ 160.00
11 Home Outreach Support Services	\$ 75.00	-	\$ -
12 Birth Outcome Confirmation	\$ 40.00	-	\$ -
TOTAL SUB-CONTRACTOR REIMBURSEMENT		88	\$ 2,140.00

Amount Due \$ 2,140.00



Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59225	LCP CHECKING xxxxx6649	\$2,140.00

Tracking ID: 59225**Total Amount:** \$2,140.00**Created:** 01/09/2018 11:16 AM**Total Payments:** 1**Created By:** DOROTHY WALLIS**From:** LCP CHECKING xxxxx6649**Authorized:** 01/09/2018 11:16 AM**ACH Class Code:** CCD**Authorized By:** DOROTHY WALLIS**ACH Header:** CARING TO LOVE M**Will process On:** 1/9/2018**Effective:** 1/10/2018**RECIPIENTS:**

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
CATHOLIC CHARITIES	CATHOLIC CHARITIES		2,140.00	XXXXX21274	Checking	XXXXX0137	

Addenda: Catholic-Dec17**APPROVAL(S):**

1 DOROTHY WALLIS

Request for Reimbursement Form
LOUISIANA LIFE CHOICES PROJECT
OFFICIAL LIFE CHOICES PROJECT MONTHLY REPORTING FORM

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Direct questions to Dorothy Wallis, Project Director, Phone 225-273-1124

Name of Organization Women's Life Ministries
 Project Number LCP17-18-112
 Date of Report 12/01/2017 thru 12/31/2017 (Report Printed: 12/28/2017)
 Report Submitted By Teresa Ragusa
 Address 3813 N. Flannery Road
 City State Zip Baton Rouge, LA 70814

IN KIND

Items / Equipment	Appr Value	Source Or Donor	Client	Coun Mins	Center ID
			Not Appr		

REIMBURSEMENT

New Pos. Clients:5 2nd:5 3rd:4 Pantry:11 Home:2 Postpartum:7

Description of Service	#Served	Reimb. Cost	Total
Intake Application	6	\$10	\$ 60
Positive Pregnancy Test	5	\$10	\$ 50
Negative Pregnancy Test	1	\$10	\$ 10
Abstinence Education	1	\$30	\$ 30
Counseling	9	\$40	\$ 360
Referral Services	5	\$10	\$ 50
Health Risk Assessment	7	\$30	\$ 210
Care Plan Development	5	\$30	\$ 150
On-Going Care/Monitoring	6	\$30	\$ 180
Family Support Services	11	\$40	\$ 440
Home Outreach Support Services	2	\$75	\$ 150
Birth Outcome Confirmation	7	\$40	\$ 280

Total Services 65 \$ 1970

2nd Positive and/or Negative Test Authorization

Adjustments:

Total Billed

I certify that no funds were used for religious purposes or materials and that none of the services provided above are already funded by another state or federal funding source.

Director's Signature

Teresa Ragusa
Garnetion Wallin
Rhonda Bassan

Supervisor's Signature

Data Entry Clerk's Signature

***** FOR OFFICIAL USE ONLY *****

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SECTION G Coordinated Prenatal Care Services

P.O.# 2000 224936

Women's Life MinistriesLCP17-18-112

Cumm from Last Month	30	Cumm 2nd Visits Last Month	24
Number of New Participants for This Month	6	New 2nd Visits	7
Cummulative Participants	36	Cumm 2nd Visits	31

REIMBURSEMENT

<u>Client Services:</u>	<u>UNIT COST</u>	<u># Clients</u>	<u>TOTALS</u>
1 Intake Application Process	\$ 10.00	6	\$ 60.00
2 Positive Pregnancy Test	\$ 10.00	5	\$ 50.00
3 Negative Pregnancy Test	\$ 10.00	1	\$ 10.00
4 Abstinence Education	\$ 30.00	1	\$ 30.00
5 Counseling	\$ 40.00	9	\$ 360.00
6 Referral Services	\$ 10.00	5	\$ 50.00
7 Health Risk Assessment	\$ 30.00	7	\$ 210.00
8 Care Plan Care	\$ 30.00	5	\$ 150.00
9 On-going Care	\$ 30.00	6	\$ 180.00
10 Family Support Services	\$ 40.00	11	\$ 440.00
11 Home Outreach Support Services	\$ 75.00	2	\$ 150.00
12 Birth Outcome Confirmation	\$ 40.00	7	\$ 280.00
TOTAL SUB-CONTRACTOR REIMBURSEMENT		65	\$ 1,970.00

Amount Due \$ **1,970.00**



Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59226	LCP CHECKING xxxxx6649	\$1,970.00

Tracking ID: 59226**Total Amount:** \$1,970.00**Created:** 01/09/2018 11:17 AM**Total Payments:** 1**Created By:** DOROTHY WALLIS**From:** LCP CHECKING xxxxx6649**Authorized:** 01/09/2018 11:17 AM**ACH Class Code:** CCD**Authorized By:** DOROTHY WALLIS**ACH Header:** CARING TO LOVE M**Will process On:** 1/9/2018**Effective:** 1/10/2018**RECIPIENTS:**

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
WOMENS LIFE MINISTRIES	WOMENS LIFE MINISTRIES		\$1,970.00	XXXX24618	Checking	XXXX5690	

Addenda: WLM-Dec17**APPROVAL(S):**

1 DOROTHY WALLIS

**Request for Reimbursement Form
LOUISIANA LIFE CHOICES PROJECT
OFFICIAL LIFE CHOICES PROJECT MONTHLY REPORTING FORM**

Direct questions to Dorothy Wallis, Project Director, Phone 225-273-1124

Name of Organization Restoration Pregnancy Resource Ctr.
 Project Number LCP17-18-116
 Date of Report 12/01/2017 thru 12/31/2017 Report Printed: 12/22/2017
 Report Submitted By Tara Hudgins
 Address
 City State Zip

IN KIND

Items / Equipment	Appr Value	Source Or Donor	Client		
			Not Appr	Coun Mins	Date Center ID

REIMBURSEMENT

New Pos. Clients:14 2nd:10 3rd:10 Pantry:12 Home:4 Postpartum:5

Description of Service	#Served	Reimb. Cost	Total
Intake Application	16	\$10	\$ 160
Positive Pregnancy Test	14	\$10	\$ 140
Negative Pregnancy Test	2	\$10	\$ 20
Abstinence Education	2	\$30	\$ 60
Counseling	24	\$40	\$ 960
Referral Services	10	\$10	\$ 100
Health Risk Assessment	18	\$30	\$ 540
Care Plan Development	14	\$30	\$ 420
On-Going Care/Monitoring	14	\$30	\$ 420
Family Support Services	8	\$40	\$ 320
Home Outreach Support Services	4	\$75	\$ 300
Birth Outcome Confirmation	5	\$40	\$ 200

Total Services 131 \$ 3640

2nd Positive and/or Negative Test Authorization

Adjustments:	<input type="checkbox"/>	<input type="checkbox"/>
Total Billed	<input type="checkbox"/>	<input type="checkbox"/>

I certify that no funds were used for religious purposes or materials and that none of the services provided above are already funded by another state or federal funding source.

Director's Signature

Supervisor's Signature

Data Entry Clerk's Signature

Dorothy Wallis
Jessica D. Hudgins
Kristi Behernes

*** FOR OFFICIAL USE ONLY ***

112

SECTION G Coordinated Prenatal Care Services

P.O.# 2000 224936

Restoration HouseLCP 17-18-116

Cumm from Last Month	115 Cumm 2nd Visits Last Month	109
Number of New Participants for This Month	16 New 2nd Visits	18
Cummulative Participants	131 Cumm 2nd Visits	127

REIMBURSEMENT

<u>Client Services:</u>	<u>UNIT COST</u>	<u># Clients</u>	<u>TOTALS</u>
1 Intake Application Process	\$ 10.00	16	\$ 160.00
2 Positive Pregnancy Test	\$ 10.00	14	\$ 140.00
3 Negative Pregnancy Test	\$ 10.00	2	\$ 20.00
4 Abstinence Education	\$ 30.00	2	\$ 60.00
5 Counseling	\$ 40.00	24	\$ 960.00
6 Referral Services	\$ 10.00	10	\$ 100.00
7 Health Risk Assessment	\$ 30.00	18	\$ 540.00
8 Care Plan Care	\$ 30.00	14	\$ 420.00
9 On-going Care	\$ 30.00	14	\$ 420.00
10 Family Support Services	\$ 40.00	8	\$ 320.00
11 Home Outreach Support Services	\$ 75.00	4	\$ 300.00
12 Birth Outcome Confirmation	\$ 40.00	5	\$ 200.00
TOTAL SUB-CONTRACTOR REIMBURSEMENT		131	\$ 3,640.00

Amount Due \$ 3,640.00



Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59302	LCP CHECKING xxxxx6649	\$3,640.00

Tracking ID: 59302

Total Amount: \$3,640.00

Created: 01/09/2018 12:39 PM

Total Payments: 1

Created By: DOROTHY WALLIS

From: LCP CHECKING xxxxx6649

Authorized: 01/09/2018 12:39 PM

ACH Class Code: CCD

Authorized By: DOROTHY WALLIS

ACH Header: CARING TO LOVE M

Will process On: 1/9/2018

Effective: 1/10/2018

RECIPIENTS:

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
RESTORATION PREGNANCY	RESTORATION PREGNANCY		\$3,640.00	XXXX176	Checking	XXXX5459	

Addenda: Restoration-Dec17

APPROVAL(S):

1 DOROTHY WALLIS

12/29/2017

PO# 2000 224936-1217

Section G OTHER CHARGES

Request for Reimbursement Report

LOUISIANA LIFE CHOICES PROJECT
OFFICIAL LIFE CHOICES PROJECT MONTHLY REPORTING FORM

Direct questions to Dorothy Wallis, Project Director, Phone 225-273-1124

Name of Organization CPC Gonzales
 Project Number LCP17-18-01-1
 Date of Report 12/31/2017 thru 12/31/2017 (Report Printed: 12/29/2017)
 Report Submitted By Michelle Dyess
 Address 322 E. Worthy
 City State Zip Gonzales, LA 70737

IN KIND

Items / Equipment	Appr Value	Source Or Donor	Client		
			Not Appr	Coun Mins	Date

REIMBURSEMENT

New Pos. Clients:1 2nd:1 3rd:1 Pantry:4 Home:2 Postpartum:0

Description of Service	#Served	Reimb. Cost	Total
Intake Application	8 ✓	\$10 ✓	\$ 80 ✓
Positive Pregnancy Test	1 ✓	\$10 ✓	\$ 10 ✓
Negative Pregnancy Test	7 ✓	\$10 ✓	\$ 70 ✓
Abstinence Education	7 ✓	\$30 ✓	\$ 210 ✓
Counseling	2 ✓	\$40 ✓	\$ 80 ✓
Referral Services	4 ✓	\$10 ✓	\$ 40 ✓
Health Risk Assessment	4 ✓	\$30 ✓	\$ 120 ✓
Care Plan Development	1 ✓	\$30 ✓	\$ 30 ✓
On-Going Care/Monitoring	3 ✓	\$30 ✓	\$ 90 ✓
Family Support Services	1 ✓	\$40 ✓	\$ 40 ✓
Home Outreach Support Services	2 ✓	\$75 ✓	\$ 150 ✓
Birth Outcome Confirmation	0 ✓	\$40 ✓	\$ 0 ✓

Total Services 40 \$ 920

2nd Positive and/or Negative Test Authorization

Adjustments:

Total Billed

I certify that no funds were used for religious purposes or materials and that none of the services provided above are already funded by another state or federal funding source.

Director's Signature

Michele Dyess

Supervisor's Signature

Michele Dyess

Data Entry Clerk's Signature

Michele Dyess

*** FOR OFFICIAL USE ONLY ***

SECTION G Coordinated Prenatal Care Services

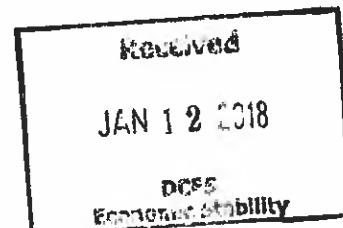
P.O.# 2000 224936

CPC-Gonzales LCP 17-18-01-1LCP 17-18-

Cumm from Last Month	59 Cumm 2nd Visits Last Month	19
Number of New Participants for This Month	8 New 2nd Visits	4
Cummulative Participants	67 Cumm 2nd Visits	23

REIMBURSEMENT

<u>Client Services:</u>	<u>UNIT COST</u>	<u># Clients</u>	<u>TOTALS</u>
1 Intake Application Process	\$ 10.00	8	\$ 80.00
2 Positive Pregnancy Test	\$ 10.00	1	\$ 10.00
3 Negative Pregnancy Test	\$ 10.00	7	\$ 70.00
4 Abstinence Education	\$ 30.00	7	\$ 210.00
5 Counseling	\$ 40.00	2	\$ 80.00
6 Referral Services	\$ 10.00	4	\$ 40.00
7 Health Risk Assessment	\$ 30.00	4	\$ 120.00
8 Care Plan Care	\$ 30.00	1	\$ 30.00
9 On-going Care	\$ 30.00	3	\$ 90.00
10 Family Support Services	\$ 40.00	1	\$ 40.00
11 Home Outreach Support Services	\$ 75.00	2	\$ 150.00
12 Birth Outcome Confirmation	\$ 40.00	-	\$ -
TOTAL SUB-CONTRACTOR REIMBURSEMENT		40	\$ 920.00

Amount Due \$ 920.00



Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59305	LCP CHECKING xxxxx6649	\$920.00

Tracking ID: 59305

Total Amount: \$920.00

Created: 01/09/2018 12:40 PM

Total Payments: 1

Created By: DOROTHY WALLIS

From: LCP CHECKING xxxxx6649

Authorized: 01/09/2018 12:41 PM

ACH Class Code: CCD

Authorized By: DOROTHY WALLIS

ACH Header: CARING TO LOVE M

Will process On: 1/9/2018

Effective: 1/10/2018

RECIPIENTS:

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
CARE PREGNANCY CLINIC	CARE PREGNANCY CLINIC	59305	\$920.00	XXXX6569	Checking	XXXXX0153	

Addenda:

CPC Gonzales Dec 17

APPROVAL(S):

1 DOROTHY WALLIS

PO# 2000 224936

SECTION I

INDIRECT COST

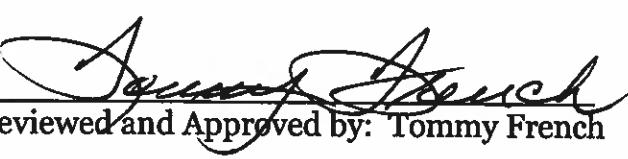


Invoice

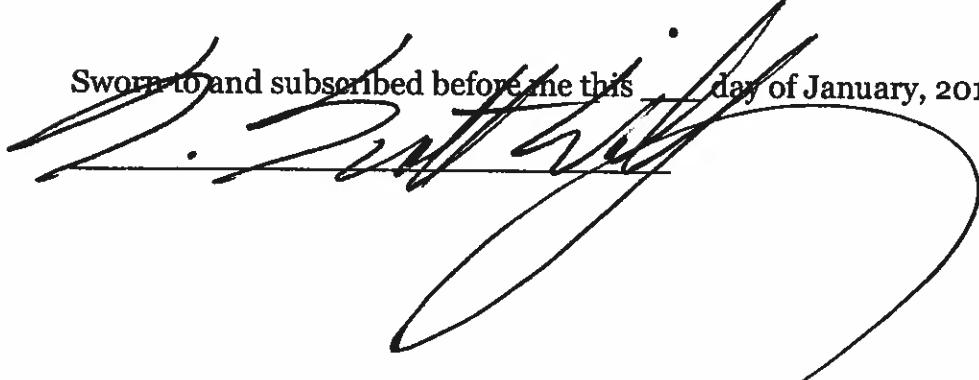
December 2017

Dorothy Wallis
3813 North Flannery
Baton Rouge, LA 70814
(225) 215-0004 office
(225) 273-5931 fax

Description:	Amount:
Life Choice Project Administrator Monthly Salary	\$4500.00


Reviewed and Approved by: Tommy French

Sworn to and subscribed before me this _____ day of January, 2018



S. SCOTT WILFONG
NOTARY PUBLIC
ID # 82151
commission does not expire



Created	Status	Approvals	Transaction Type	Account	Amount
1/9/2018	Authorized	1 of 1	ACH Batch - Tracking ID: 59128	LCP CHECKING xxxxx6649	\$4,500.00

Tracking ID: 59128

Total Amount: \$4,500.00

Created: 01/09/2018 10:11 AM

Total Payments: 1

Created By: DOROTHY WALLIS

Description: DOROTHY WALLIS, CEO

Authorized: 01/09/2018 10:11 AM

From: LCP CHECKING xxxxx6649

Authorized By: DOROTHY WALLIS

ACH Class Code: PPD

Will process On: 1/9/2018

ACH Header: CARING TO LOVE M

Effective: 1/10/2018

RECIPIENTS:

Name	ACH Name	ACH Id	Amount	Account Number	Account Type	Routing Number	Email Address
Dorothy Wallis	Dorothy Wallis		\$4,500.00	XXXXX49388	Checking	XXXXX0137	

Addenda: D Wallis-Dec 2017

APPROVAL(S):

1 DOROTHY WALLIS

Caring to Love Ministries - Time Study Monthly Reporting Form

Period: December 2017

Employee's Name:

Dorothy Wallis

Program	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total Hours
LLCP	6.8	34	0	8.5	8.5	7.1	7.2	7.7	4.3	0	9.4	9.4	6.8	6.8	3.4	0	8.5	7.7	7.1	6.8	6.8	3.4	0	0	0	0	0	0	162.350.0			
ADMIN	1.2	.6	0	1.5	1.5	1.4	1.4	1.4	.8	0	1.7	1.7	1.2	1.2	.6	0	1.5	1.4	1.4	1.2	1.2	.4	0	0	1.2	1.4	.5	0	28.650.0			
Hours	8	4	0	10	10	9	9	9	5	0	11	11	8	8	8	4	0	10	9	9	8	8	4	0	0	0	8	9	9	3	0	191.00

Employee Signature:

Walter Wallace Date: Jan 5, 2018

Jan 5, 2018

Date:

Supervisor Signature:

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Date:

GBS77117000183020



Group Payment Notice

CARING TO LOVE MINISTRIES

ATTN: DOROTHY WALLIS
3813 N. FLANNERY RD
BATON ROUGE, LA 70814

Group ID:	27A61ERC
Subgroup ID's:	0000

Due Date: 12/15/2017
Billing Date: 11/29/2017

Invoice Period From: 12/15/2017
Invoice Period Through: 01/14/2018
Invoice Number: 173330001147

Subscriber Count: 2

Outstanding Balance.....	\$2,134.03
Premiums This Period.....	\$2,134.03
Member Adjustments.....	\$0.00
Fees and Other Adjustments.....	\$0.00
Current Billed Amount.....	\$2,134.03

\$2,134.03	12/15/17	3
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5225 Employee Benefits - CPC
Please Pay Total Amount Due

04BA0028 R02/16

Blue Cross and Blue Shield of Louisiana incorporated as Louisiana Health Service & Indemnity Company.
HMO Louisiana, Inc. and Southern National Life Insurance Company, Inc. are subsidiaries of Blue Cross and Blue Shield of Louisiana.
All three companies are independent licensees of the Blue Cross and Blue Shield Association.

continued ➔

SECTION I Indirect Cost-Insurance

LCP Budget to reimburse CTLM = \$250.00 for month

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Group Name: CARING TO LOVE MINISTRIES
Group ID: 27A61ERC
Subgroup ID: 0000
Due Date: 12/15/2017

► A001 - ACTIVE EMPLOYEES

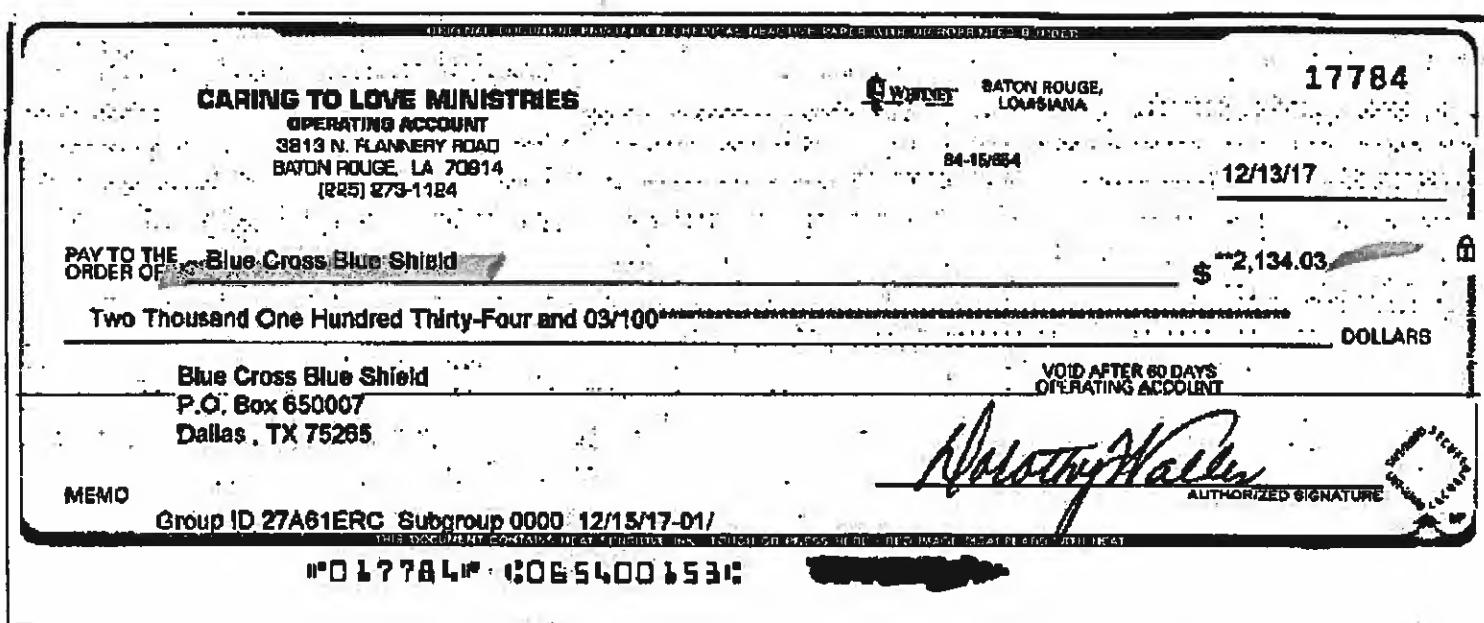
Subscriber Name	Subscriber ID	Product	Adjustment	Premium	Amount*	Total Premium
Hardee, Kim A.	202227623	PPO	\$0.00	\$1,244.65	0	\$1,244.65
Wällis, Dorothy T.	200579064	PPO	\$0.00	\$889.38	0	\$889.38
Totals						\$2,134.03

SECTION I Indirect Cost-Insurance

LCP Budget to reimburse CTLM = \$250.00 for month

Transactions Details

Posting Date	12/19/2017
Transaction Date	12/19/2017
Description	DDA CHECK 0000017784
Transaction Type	Debit
T/C	0075
Amount	\$2,134.03
Balance	\$12,416.09



SECTION I Indirect Cost-Insurance

LCP Budget to reimburse CTLM = \$250.00 for month

124
1/1